

APPLICATION BUDGET SHEET

East Texas Council of Governments / Health & Human Services Commission
 Social Services Block Grant for Emergency Disaster Relief Funds for Hurricanes Ike and Dolly

Applicant			
Organization Name			
Address		City, ZIP	
Phone		Fax	
Email		Point of Contact	

<u>A.</u> Direct Program Costs (to include Construction Costs)	
<u>B.</u> Program Management	
<u>C.</u> Environmental Reviews	
<u>D.</u> Procured Services	
<u>E.</u> Acquisition (not applicable under <u>A</u>)	
<u>F.</u> Personnel Training and Retraining	
<u>G.</u> Other Associated Costs (Explain)	
<u>G.</u>	
<u>G.</u>	
<u>G.</u>	
Total Amount Requested	