

**Budget Template:**

<b>BLUE CROSS BLUE SHIELD OF MICHIGAN FOUNDATION</b>						
Budget Request						
Please make the submitted budget as detailed as possible. A budget justification for each line item must accompany each line. Funds requested, anticipated, or provided by other sources for the same project must be described in detail and referred to in the cover letter.						
SAMPLE LINE ITEMS						
	<b>Percent Effort (%)</b>	<b>Base Salary</b>	<b>Percent Fringe (%)</b>	<b>Fringe Amount</b>	<b>Other</b>	<b>Total BCBSM Funding Request</b>
<b>Personnel Name, Project Title</b>						
<b>Supplies</b>						
<b>Project Staff Travel</b>						
<b>Consultant Fees</b>						
<b>Participant Compensation</b>						
<b>Dissemination Cost</b>						
<b>Funds from Other Sources</b>					\$	
<b>TOTAL BCBSM Foundation Funding Request</b>						\$
The Foundation does not pay for indirect costs with the exception of limited fringe benefits. The allowable fringe benefit expense may not exceed the lesser of 25 percent of the salary subtotal figure or the actual cost of the fringe benefits. Fringe benefits include health, person and/or medical benefits. The following are not supported by this funding program: computer equipment, including hardware and software, unless they are directly related to the aim of the proposed project. Other costs that are ineligible include capital expenses.						