Military Facility

Principal Investigator:							
DETAILED BUDGET Start Date:							
DOD CIVILIAN AND MILITARY PERSONNEL			ANNUAL	% Effort	DOLLAR AMOUNT	CENTS)	
NAME	ROLE ON Project	TITLE/ POSITION	BASE SALARY	ON PROJECT	Salary Requested	Fringe Benefits	TOTALS
				SUBTOTALS	x		
Enter DoD civilian and milita	w lovel of offer	ut subothon on not s				a gran a stand	
If reimbursement is requested, I	l, the method o	f reimbursement w	ill be handle	l during nego	tiations. If no	-	
Consultant Costs							
MAJOR EQUIPMENT (ITEMIZE BY ITEM IN JUSTIFICATION)							
MATERIALS, SUPPLIES, AND CONSUMABLES (ITEMIZE BY CATEGORY IN JUSTIFICATION)							
Travel Costs							
Enter DoD civilian and milita Facility for travel costs, if pos awarded to an extramural org	sible. If not po	ssible, the military	Facility will	be required t	o cover the costs.	Funds	
RESEARCH-RELATED SUBJECT COSTS							
OTHER DIRECT COSTS (ITEMIZE	BY CATEGORY	N JUSTIFICATION)					
		SUI	BTOTAL DI	RECT COSTS	S FOR THIS BU	DGET PERIOD	
DIRECT COST							
SUBCONTRACT COSTS	INDIRECT COS	Т					
TOTAL DIRECT COSTS FOR 7	THIS BUDGET	PERIOD					

TOTAL INDIRECT COSTS FOR THIS BUDGET PERIOD

Military Facility

Principal Investigator:							
DETAILED BUDGET Start Date:							
DOD CIVILIAN AND MILITARY PERSONNEL			ANNUAL	% Effort	DOLLAR AMOUNT	CENTS)	
NAME	Role on Project	TITLE/ POSITION	BASE SALARY	ON PROJECT	Salary Requested	Fringe Benefits	TOTALS
				SUBTOTALS	1		
Enter DoD civilian and mili	town lovel of offe	nt whether or not r				aquested	
If reimbursement is request reimbursement is requested	ted, the method o	f reimbursement w	ill be handle	d during nego	tiations. If no		
Consultant Costs							
MAJOR EQUIPMENT (ITEMIZE BY ITEM IN JUSTIFICATION)							
MATERIALS, SUPPLIES, AND CONSUMABLES (ITEMIZE BY CATEGORY IN JUSTIFICATION)							
TRAVELCOSTS							
Enter DoD civilian and mili Facility for travel costs, if p awarded to an extramural o	ossible. If not po	ssible, the military	Facility will	be required t	o cover the costs.	Funds	
Research-related Subject costs							
OTHER DIRECT COSTS (ITEMI	ZE BY CATEGORY	IN JUSTIFICATION)					
		SUI	BTOTAL DI	RECT COSTS	S FOR THIS BU	DGET PERIOD	
	DIRECT COST						
SUBCONTRACT COSTS	INDIRECT COS	Т					
TOTAL DIRECT COSTS FO	R THIS BUDGET	PERIOD					
1							

TOTAL INDIRECT COSTS FOR THIS BUDGET PERIOD

Military Facility

Principal Investigator:							
DETAILED BUDGET Start Date:							
DOD CIVILIAN AND MILITARY PERSONNEL			ANNUAL	% Effort	DOLLAR AMOUNT	CENTS)	
NAME	Role on Project	TITLE/ POSITION	BASE SALARY	ON PROJECT	Salary Requested	Fringe Benefits	TOTALS
				SUBTOTALS	1		
Enter DoD civilian and mili	town lovel of offe	nt whether or not r				aquested	
If reimbursement is request reimbursement is requested	ted, the method o	f reimbursement w	ill be handle	d during nego	tiations. If no		
Consultant Costs							
MAJOR EQUIPMENT (ITEMIZE BY ITEM IN JUSTIFICATION)							
MATERIALS, SUPPLIES, AND CONSUMABLES (ITEMIZE BY CATEGORY IN JUSTIFICATION)							
TRAVELCOSTS							
Enter DoD civilian and mili Facility for travel costs, if p awarded to an extramural o	ossible. If not po	ssible, the military	Facility will	be required t	o cover the costs.	Funds	
Research-related Subject costs							
OTHER DIRECT COSTS (ITEMI	ZE BY CATEGORY	IN JUSTIFICATION)					
		SUI	BTOTAL DI	RECT COSTS	S FOR THIS BU	DGET PERIOD	
	DIRECT COST						
SUBCONTRACT COSTS	INDIRECT COS	Т					
TOTAL DIRECT COSTS FO	R THIS BUDGET	PERIOD					
1							

TOTAL INDIRECT COSTS FOR THIS BUDGET PERIOD

Military Facility

Principal Investigator:							
DETAILED BUDGET Start Date:							
DOD CIVILIAN AND MILITARY PERSONNEL			ANNUAL	% Effort	DOLLAR AMOUNT	CENTS)	
NAME	Role on Project	TITLE/ POSITION	BASE SALARY	ON PROJECT	Salary Requested	Fringe Benefits	TOTALS
				 SUBTOTALS	5		
Enter DoD civilian and mili If reimbursement is request reimbursement is requested	ed, the method o	f reimbursement w	ill be handle	d during nego	tiations. If no		
Consultant Costs							
MAJOR EQUIPMENT (ITEMIZE BY ITEM IN JUSTIFICATION)							
MATERIALS, SUPPLIES, AND CONSUMABLES (ITEMIZE BY CATEGORY IN JUSTIFICATION)							
Travel Costs							
Enter DoD civilian and mili Facility for travel costs, if p awarded to an extramural o	ossible. If not po	ssible, the military	Facility will	be required t	o cover the costs	. Funds	
RESEARCH-RELATED SUBJECT COSTS							
OTHER DIRECT COSTS (ITEMIZE BY CATEGORY IN JUSTIFICATION)							
		SUI	BTOTAL DI	RECT COSTS	S FOR THIS BU	DGET PERIOD	
DIRECT COST							
SUBCONTRACT COSTS	INDIRECT COS	Т					
TOTAL DIRECT COSTS FOR	R THIS BUDGET	PERIOD					

TOTAL INDIRECT COSTS FOR THIS BUDGET PERIOD

Military Facility

Principal Investigator:							
DETAILED BUDGET Start Date:							
DOD CIVILIAN AND MILITARY PERSONNEL			ANNUAL	% Effort	DOLLAR AMOUNT	CENTS)	
NAME	Role on Project	TITLE/ POSITION	BASE SALARY	ON PROJECT	Salary Requested	Fringe Benefits	TOTALS
				 SUBTOTALS	5		
Enter DoD civilian and mili If reimbursement is request reimbursement is requested	ed, the method o	f reimbursement w	ill be handle	d during nego	tiations. If no		
Consultant Costs							
MAJOR EQUIPMENT (ITEMIZE BY ITEM IN JUSTIFICATION)							
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Travel Costs							
Enter DoD civilian and mili Facility for travel costs, if p awarded to an extramural o	ossible. If not po	ssible, the military	Facility will	be required t	o cover the costs	. Funds	
RESEARCH-RELATED SUBJECT COSTS							
OTHER DIRECT COSTS (ITEMIZE BY CATEGORY IN JUSTIFICATION)							
		SUI	BTOTAL DI	RECT COSTS	S FOR THIS BU	DGET PERIOD	
DIRECT COST							
SUBCONTRACT COSTS	INDIRECT COS	Т					
TOTAL DIRECT COSTS FOR	R THIS BUDGET	PERIOD					

TOTAL INDIRECT COSTS FOR THIS BUDGET PERIOD

Military Facility

Detailed Cost Estimate Form - Cumulative Budget

Make sure project end date is entered below!

Principal Investigator:

DETAILED BUDGET FOR ENTIRE PROPOSED PERIOD OF SUPPORT Project Start Date: INITIAL ADDITIONAL YEARS OF SUPPORT REQUESTED Project End Date BUDGET PERIOD BUDGET CATEGORY 3rd 4th (FROM FORM PAGE 1) 2nd 5th TOTAL TOTALS¹ Personnel FRINGE BENEFITS CONSULTANT COSTS MAJOR EQUIPMENT MATERIALS, SUPPLIES, AND CONSUMABLES TRAVEL COSTS SUBJECT-RELATED COSTS OTHER DIRECT COSTS SUBTOTAL DIRECT COSTS (No Subcontract) DIRECT SUBCONTRACT COSTS INDIRECT TOTAL DIRECT COSTS FOR ENTIRE PROPOSED PERIOD OF SUPPORT TOTAL INDIRECT COSTS FOR ENTIRE PROPOSED PERIOD OF SUPPORT TOTAL COSTS FOR THE ENTIRE PROPOSED PERIOD OF SUPPORT THIS AMOUNT SHOULD AGREE WITH THAT ENTERED IN THE REQUIRED FILES

¹ Itemize all budget categories for each year on the Justification page that follows.

JUSTIFICATION: ITEMIZE ALL BUDGET CATAGORIES FOR EACH YEAR. FOLLOW THE BUDGET JUSTIFICATION INSTRUCTIONS IN THE GENERAL SUBMISSION INSTRUCTIONS EXACTLY. USE CONTINUATION PAGES AS NEEDED.