2021 Continuum of Care Budget Worksheet

- 1. Please complete each tab as it relates to your individual project. If there is no funding being requested for a specific budget line item please leave this tab blank.
- 2. Only enter information in the light green shaded boxes.
- 3. DO NOT enter any information in the light gray shaded cells, as these contain formulas that will automatically calculate totals and percentages.
- 4. All projects must complete the Project Information and Match & Leveraging tab.
- 5. Before submission with the concept paper ensure the Summary Budget tab matches the amount of funds you are looking to request.

Agency Name:	
Project Name:	

Acquisition/Rehabilitation/New Construction Budget	
Budget Item	Total CoC Request
Total Acquisition	
Total Rehabilitation	
Total New Construction:	
Total	\$ -

Leasing Units Budget			
Unit Size	# of Units	Total CoC Request	
SRO			
0 bedroom			
1 Bedroom			
2 Bedroom			
3 Bedroom			
4 Bedroom			
	Total	\$ -	

*For leasing program - the amount you are requesting should not exceed the amount awarded in the previous round of funding. If this is a new leasing project you may request up to the Fair Market Rent for the Unit Size (see FMRs for 2018

Rental Assistance Budget						
Unit Size	# Units		2022 FMR	Rental Assistance Requested	Months	Total CoC Request
0 bedroom		\$	1,237.00		12	\$ -
1 bedroom		\$	1,481.00		12	\$ -
2 bedroom		\$	1,736.00		12	\$ -
3 bedroom		\$	2,159.00		12	\$ -
4 bedroom		\$	2,691.00		12	\$ -
					Total	\$ -

*For rental assistance programs - the amount you are requesting should not exceed the amount awarded in the previous round of funding. Rental Assistance programs may request less than the FMR if they choose too, if not please use the 2022 FMRs listed.

Supportive Services Budget			
Eligible Costs	CoC Funds Requesting		
1. Assessment of Service Needs			
2. Assistance with Moving Costs			
3. Case Management			
4. Child Care			
5. Education Services			
6. Employment Assistance			
7. Food			
8. Housing/Counseling Services			
9. Legal Services			
10. Life Skills			
11. Mental Health Services			
12. Outpatient Health Services			
13. Outreach Services			
14. Substance Abuse Treatment Services			
15. Transportation			
16. Utility Deposits			
17. Direct Provision of Services			
Total	\$ -		

Operating Budget			
Eligible Costs	CoC Funds Requested		
1. Maintenance/Repair			
2. Property Taxes and Insurance			
3. Replacement Reserve			
4. Building Security			
5. Electricity, Gas, and Water			
6. Furniture			
7. Equipment (lease/buy)			
Total	\$ -		

HMIS Budget			
Eligible Costs	CoC Funds Requested		
1. Equipment			
2. Software			
3. Services			
4. Personnel			
5. Space & Operations			
Total	\$ -		

Summary Budget			
Total Acquisition	\$ -		
Total Rehabilitation	\$ -		
Total New Construction	\$ -		
Total Leasing	\$ -		
Total Rental Assistance	\$ -		
Total Supportive Services	\$ -		
Total Operating	\$ -		
Total HMIS	\$ -		
Subtotal Funding Requested:	\$ -		
Admin Costs			
Total CoC Funding Requested	\$ -		
_			
Total Budget for Match Requirement	\$ -		

*Admin costs should not exceed 7% of the Subtotal of budget line items or the amount awarded during the previous round of funding (whichever is lower)

Match and Leveraging

Match			
	\$ -		
	#DIV/0!		
Contributer	Cash or In-Kind?	Value of Commitment	
	Total Match	ć	
	-		

Leveraging			
Т	#DIV/0!		
Contributer	r Cash or In-Kind?		
	Total Leveraging	\$ -	