# **Budget Summary**

# Note: Any errors detected on this page should be fixed on the corresponding Budget Detail tab.

	Yea	r 1	Yea (if nee		Yea (if nee		Yed (if ned		Yed (if ne	ar 5 eded)	
Budget Category	Federal Request	Non-Federal Request	Federal Request	Non-Federal Request	Federal Request	Non-Federal Request	Federal Request	Non-Federal Request	Federal Request	Non-Federal Request	Total(s)
A. Personnel	\$84,292	\$0	\$137,477	\$0	\$138,778	\$0	\$0	\$0	\$0	\$0	\$360,547
B. Fringe Benefits	\$43,158	\$0	\$70,196	\$0	\$70,867	\$0	\$0	\$0	\$0	\$0	\$184,221
C. Travel	\$4,156	\$0	\$4,156	\$0	\$4,156	\$0	\$0	\$0	\$0	\$0	\$12,468
D. Equipment	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
E. Supplies	\$0	\$0	\$1,800	\$0	\$24,000	\$0	\$0	\$0	\$0	\$0	\$25,800
F. Construction	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
G. Subawards (Subgrants)	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
H. Procurement Contracts	\$100,000	\$0	\$107,280	\$0	\$107,280	\$0	\$0	\$0	\$0	\$0	\$314,560
I. Other	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Total Direct Costs	\$231,606	\$0	\$320,909	\$0	\$345,081	\$0	\$0	\$0	\$0	\$0	\$897,596
J. Indirect Costs	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Total Project Costs	\$231,606	\$0	\$320,909	\$0	\$345,081	\$0	\$0	\$0	\$0	\$0	\$897,596
Does this budget contain cor	ference costs w	hich is defined I	proadly to include	meetings, retre	eats, seminars, syr	mposia, and trai	ning activities? -			No	

No

# Budget Detail - Year 1

Does this budget contain conference costs which is defined broadly to include meetings, retreats, seminars, symposia, and training activities? - Y/N (DOJ Financial Guide, Section 3.10)

A. Personnel

Name	Position			Compt	utation				
List each name, if known.	List each position, if known.	Show annual salary rate & amount of time devoted to the project for each name/position.							
		Salary	Rate	Time Worked (# of hours, days, months, years)	Percentage of Time	Total Cost	Non-Federal Contribution	Federal Request	
To be Hired	Diversion Officer	\$84,292.00	yearly	1	100%	\$84,292	\$0	\$84,292	
					Total(s)	\$84,292	\$0	\$84,292	
Narrative									

Salary for one Duluth Police Department diversion officer at the investigator level who will provide a specialized police response to opioid abuse victims within the Lake Superior Drug and Violent Crime Task Force service area. This response will intervene with super users to provide follow up services after crises and alternatives to incarceration.

Name	Computation							
List each grant-supported position receiving fringe benefits.	Show the basis for computation.							
	Base	Rate	Total Cost	Non-Federal Contribution	Federal Request			
Diversion Officer	\$84,292.00	51.20%	\$43,158		\$43,158			
		Total(s)	\$43,158	\$0	\$43,158			

# Narrative

Fringe benefits for a diversion officer salary. Some benefits are set, some are set percentages.

Medicare - 1.45%

Retirement - 16.95%

Health Care Savings - 3%

Medical Insurance - 29.10%

Dental Insurance - \$372.00 (.44%)

Life Insurance - \$204.00 (.24%)

Employee Assistance Program - \$13.44 (.02%)

Total = 51.20%

Purpose of Travel	Location	Type of Expense	Basis				Comp	utation		
Indicate the purpose of each trip or type of trip (training, advisory group meeting)	Indicate the travel destination.	Lodging, Meals, Etc.	Per day, mile, trip, Etc.		Compute the cost of each type of expe				er of people travelin	g.
				Cost	Quantity	# of Staff	# of Trips	Total Cost	Non-Federal Contribution	Federal Request
Mandatory Face-to-Face 3-Day Meeting	Washington, D.C.	Transportation	Round-trip	\$800.00	1	2	1	\$1,600	\$0	\$1,600
Mandatory Face-to-Face 3-Day Meeting	Washington, D.C.	Local Travel	N/A	\$75.00	1	2	1	\$150	\$0	\$150
Mandatory Face-to-Face 3-Day Meeting	Washington, D.C.	Meals	Day	\$34.00	4.5	2	1	\$306	\$0	\$306
Mandatory Face-to-Face 3-Day Meeting	Washington, D.C.	Lodging	Night	\$250.00	4	2	1	\$2,000	\$0	\$2,000
Mandatory Face-to-Face 3-Day Meeting	Washington, D.C.	Other	N/A	\$50.00	1	2	1	\$100	\$0	\$100
							Total(s)	\$4,156	\$0	\$4,156

Per mandatory award guidelines, two staff members must attend the mandatory 3-Day face-to-face meeting in Washington, D.C. We are following our own travel policy. Lodging is for 4 nights and meals are budgeted at 4.5 days. Travel days are computed at .75 days. Local transportation is for fare to and from the airport. Baggage fees are included at \$25 each way.

	Computation								
Compute the cost (e.g., the number of each item to be purchased X the cost per item)									
# of Items	Unit Cost	Total Cost	Non-Federal Contribution	Federal Request					
		\$0		\$0					
	Total(s)	\$0	\$0	\$0					
	# of Items	# of Items Unit Cost  Total(s)	\$0	# of items Unit Cost Total Cost Contribution \$0					

Supply Items  Provide a list of the types of items to be purchased with grant funds.	Computation  Describe the item and the compute the costs. Computation: The number of each item to be purchased X the cost per item.								
	# of Items	Unit Cost	Total Cost	Non-Federal Contribution	Federal Request				
			\$0		\$0				
		Total(s)	\$0	\$0	\$0				

Purpose	Description of Work	Description of Work Computation					
Provide the purpose of the construction	Describe the construction project(s)	Compute the	costs (e.g., the number of each item to be purch	nased X the cost p	oer item)		
	Constitution		Cost	Total Cost	Non-Federal Contribution	Federal Request	
				\$0		\$0	
			Total(s)	\$0	\$0	\$0	
arrative							

Descripti								Miles Maller
Provide a description of the activ subrecipien	vities to be carried out by	<b>Purpose</b> Describe the purpose of the subaward (subgrant)		Is the subav consultant? the section explain as travel ex included in	ward for a If yes, use below to sociated penses			
						Total Cost	Non-Federal Contribution	Federal Request
								\$0
Consultant Travel (if necessary)					Total(s)	\$0	\$0	\$0
Purpose of Travel Indicate the purpose of each trip or type of trip (training, advisory group meeting)	<b>Location</b> Indicate the travel destinati	Type of Expense  ion. Hotel, airfare, per diem	Com	npute the cost		Computation of expense X the	e number of people	traveling.
			Cost	Duration or Distance	# of Staff	Total Cost	Non-Federal Contribution	Federal Request
						\$0		\$0
					Total	\$0	\$0	\$0
H. Procurement Contracts								

Provide a description of the products contract and an estimate of the costs. promote free and open competition separate justification must be provided in excess of the Simplified Acquisition T	Applicants are encouraged to n in awarding contracts. A of for sole source procurements	Describe the purpose of the contract		Is the subaward for consultant? If yes, of the section below explain associated travel expenses included in the cos	se o		
					Total Co	st Non-Federal Contribution	Federal Request
Center for Alcohol and Drug Treatment		One bed and treatment services for one year		No	\$100,00	0 \$0	\$100,000
Consultant Travel (if necessary)				Total	(s) \$100,0	00 \$0	\$100,000
Purpose of Travel  Indicate the purpose of each trip or type of trip (training, advisory group meeting)	<b>Location</b> Indicate the travel destinatio	Type of Expense  n. Hotel, airfare, per diem	Con	npute the cost of each	Computat	ion X the number of people	traveling.
group meeting)			Cost	Duration # oj or Staf	I lotal Co	st Non-Federal Contribution	Federal Request
					\$0		\$0
				То	<b>al</b> \$0	\$0	\$0
Narrative		ed for treatment services within their Pathfinder					
eferred to them through the Lak	e Superior Diversion Prograr	n. The cost calculation is based upon an average o	of 200 treat	ment days per yea	r @ \$500.00	er treatment day.	
l. Other Costs							

List and describe items that will be paid with grants funds (e reproduction, telephone, janitorial, or security services, investigative or confidential funds).	e.g. rent, and		Show the b	asis for computation			
	Quantity	Basis	Cost	Length of Time	Total Cost	Non-Federal Contribution	Federal Request
					\$0		\$0
				Total(s)	\$0	\$0	\$0

<b>Description</b> Describe what the approved rate is and how it is applied.	Computation  Compute the indirect costs for those portions of the program which allow such costs.							
	Base	Indirect Cost Rate	Total Cost	Non-Federal Contribution	Federal Request			
			\$0		\$0			
		Tota	ıl(s) \$0	\$0	\$0			
larrative								

# **Budget Detail - Year 2**

Does this budget contain conference costs which is defined broadly to include meetings, retreats, seminars, symposia, and training activities? - Y/N (DOJ Financial Guide, Section 3.10)

No

#### A. Personnel

Name	Position			Compu	utation			
List each name, if known.	List each position, if known.		Show annual sale	voted to the project for	each name/positi	ion.		
		Salary	Rate	Time Worked (# of hours, days, months, years)	Percentage of Time	Total Cost	Non-Federal Contribution	Federal Request
Alyssa Ryder	Analyst	\$48.98	hourly	120	100%	\$5,878	\$0	\$5,878
Jessica McCarthy	Project Coordinator	\$47,307.00	yearly	1	100%	\$47,307	\$0	\$47,307
To be Hired	Diversion Officer	\$84,292.00	yearly	1	100%	\$84,292	\$0	\$84,292
					Total(s)	\$137,477	\$0	\$137,477

#### Narrative

Overtime hours for the analyst who is on the current initiative to maintain a data base for opioid statistics and ODMAP entries through 2022. The analyst will use overtime hours at the rate set by the City of Duluth for this position to accomplish the required tasks.

Salary for current Opioid Program Technician who will manage the enhanced initiative through 2022.

Salary for one Duluth Police Department diversion officer at the investigator level who will provide a specialized police response to opioid abuse victims within the Lake Superior Drug and Violent Crime Task Force service area. This response will intervene with super users to provide follow up services after crises and alternatives to incarceration.

Name  List each grant-supported position receiving fringe benefits.		Computation  Show the basis for computation.			
	Base	Rate	Total Cost	Non-Federal Contribution	Federal Request
Alyssa Ryder (Analyst)	\$5,878.00	16.35%	\$962	\$0	\$962
essica McCarthy	\$47,307.00	55.12%	\$26,076	\$0	\$26,076
Diversion Officer	\$84,292.00	51.20%	\$43,158	\$0	\$43,158
		Total(s)	\$70,196	\$0	\$70,196

Fringe benefits for a diversion officer salary. Some benefits are set, some are set percentages.

Medicare - 1.45%

Retirement - 16.95%

Health Care Savings - 3%

Medical Insurance - 29.10%

Dental Insurance - \$372.00 (.44%)

Life Insurance - \$204.00 (.24%)

Employee Assistance Program - \$13.44 (.02%)

Total = 51.20%

The Project Coordinator fringe benefit rate is 55.12% and covers the following items: Medicare (1.45%), FICA (6.2%), Unemployment (0.09%), Worker's Compensation (1.50%), Retirement (16.95%), Healthe Care Savings Plan (2.00%), Medical Insurance (26.20%), Dental Insurance (0.50%), Life Insurance (0.23%).

The Analyst overtime fringe benefit rate is 16.35% and covers the following items: Retirement (7.5%), FICA (6.2%), Medicare (1.45%), Unemployment (.07%), Workers Compensation (1.13%).

Purpose of Travel	Location	Type of Expense	Basis				Comp	utation				
Indicate the purpose of each trip or type of trip (training, advisory group meeting)	Indicate the travel destination.	Indicate the travel destination.  Lodging, Meals, Etc.   Per day, mile, trip, Etc.   Compute the cost of each type							of expense X the number of people traveling.			
				Cost	Quantity	# of Staff	# of Trips	Total Cost	Non-Federal Contribution	Federal Request		
Mandatory Face-to-Face 3-Day Meeting	Washington, D.C.	Transportation	Round-trip	\$800.00	1	2	1	\$1,600	\$0	\$1,600		
Mandatory Face-to-Face 3-Day Meeting	Washington, D.C.	Local Travel	N/A	\$75.00	1	2	1	\$150	\$0	\$150		
Mandatory Face-to-Face 3-Day Meeting	Washington, D.C.	Meals	Day	\$34.00	4.5	2	1	\$306	\$0	\$306		
Mandatory Face-to-Face 3-Day Meeting	Washington, D.C.	Lodging	Night	\$250.00	4	2	1	\$2,000	\$0	\$2,000		
Mandatory Face-to-Face 3-Day Meeting	Washington, D.C.	Other	N/A	\$50.00	1	2	1	\$100	\$0	\$100		
							Total(s)	\$4,156	\$0	\$4,156		

Per mandatory award guidelines, two staff members must attend the mandatory 3-Day face-to-face meeting in Washington, D.C. We are following our own travel policy. Lodging is for 4 nights and meals are budgeted at 4.5 days. Travel days are computed at .75 days. Local transportation is for fare to and from the airport. Baggage fees are included at \$25 each way.

ltem		Computation			
List and describe each item of equipment that will be purchased	Compute the	cost (e.g., the number of each item to be pure	hased X the cost p	er item)	
	# of Items	Unit Cost	Total Cost	Non-Federal Contribution	Federal Request
			\$0		\$0
		Total(s)	\$0	\$0	\$0
Varrative					
•					

Supply Items		Computation			
Provide a list of the types of items to be purchased with grant funds.	Describe the item and the com	pute the costs. Computation: The number of eac	ch item to be purc	chased X the cost pe	er item.
	# of Items	Unit Cost	Total Cost	Non-Federal Contribution	Federal Request
Posters	1000	\$1.50	\$1,500	\$0	\$1,500
Resource Cards	1000	\$0.30	\$300	\$0	\$300
		Total(s)	\$1,800	\$0	\$1,800

Posters will be used to advertise available services and scheduled outreach events.

Resource cards are to be distributed to opioid overdose victims and their family members listing available referral and treatment resources and contact phone numbers.

Purpose	Description of Work		Computation	feeting to consider the same of		
Provide the purpose of the construction	Describe the construction project(s)	Compute the	costs (e.g., the number of each item to be purc	hased X the cost p	per item)	
		# of Items	Cost	Total Cost	Non-Federal Contribution	Federal Reques
				\$0		\$0
arrative			Total(s)	\$0	\$0	\$0

<b>Descript</b> i  Provide a description of the activ  subrecipien	rities to be carried out by	Purpose  Describe the purpose of the subaward (subgrant)	Is the suba	ssociated xpenses			
					Total Cost	Non-Federal Contribution	Federal Request
							\$0
Consultant Travel (if necessary)				Total(s)	\$0	\$0	\$0
Purpose of Travel  ndicate the purpose of each trip or type of trip (training, advisory group meeting)	Location  Indicate the travel destination.	Type of Expense  Hotel, airfare, per diem	Compute the cost		Computation of expense X the	number of people	traveling.
		Ca	Duration ost or Distance	# of Staff	Total Cost	Non-Federal Contribution	Federal Request
		8 11			\$0		\$0
				Total	\$0	\$0	\$0
Brown Control							
<i>I. Procurement Contracts</i> Descriptio				,			

Provide a description of the products contract and an estimate of the costs. promote free and open competition separate justification must be provided in excess of the Simplified Acquisition T.	Applicants are encouraged to n in awarding contracts. A d for sole source procurements	Describe the purpose of the contract		Is the subaw consultant? the section explain ass travel exp included in	If yes, use below to sociated penses			
						Total Cost	Non-Federal Contribution	Federal Request
Dr. Jeff Maahs		Independent Evaluator		No		\$7,280	\$0	\$7,280
Center for Alcohol and Drug Treatment	1	One bed and treatment services for one ye	ar	No		\$100,000	\$0	\$100,000
Consultant Travel (if necessary)					Total(s)	\$107,280	\$0	\$107,280
Purpose of Travel	Location	Type of Expense				Computation		
Indicate the purpose of each trip or type of trip (training, advisory group meeting)	Indicate the travel destination		Com	npute the cost o			number of people	traveling.
•			Cost	Duration or Distance	# of Staff	Total Cost	Non-Federal Contribution	Federal Request
		*				\$0		\$0
					Total	\$0	\$0	\$0
Narrative								
referred to them through the Lak The independent evaluator will so	ce Superior Diversion Program  upport the project coordinato	ed for treatment services within their Pathfind. The cost calculation is based upon an averager in the collection and analysis of data relevarendent researcher cost for year 2 is calculated	e of 200 treat at to the goals	ment days po	er year @ am as we	\$500.00 per t	reatment day.	
I. Other Costs								

Quantity Basis Cost Length of Time Total Cost Non-Federal Contribution  \$0  Total(s) \$0 \$0			nitorial, or security services, and confidential funds).			Show the b	asis for computation			
				Quantity	Basis	Cost	Length of Time	Total Cost	The state of the s	Federa Reques
Total(s) \$0 \$0	\$0 \$0							\$0		\$0
70 mm y y man ( )							Total(s)	\$0	\$0	\$0
arrative Transport of the Control of		Narrative								

<b>Description</b> Describe what the approved rate is and how it is applied.	Compute the	Computation indirect costs for those portions of the program	n which allow suc	ch costs.	
	Base	Indirect Cost Rate	Total Cost	Non-Federal Contribution	Federal Request
			\$0		\$0
		Total(s)	\$0	\$0	\$0

# **Budget Detail - Year 3**

Does this budget contain conference costs which is defined broadly to include meetings, retreats, seminars, symposia, and training activities? - Y/N (DOJ Financial Guide, Section 3.10)

No

#### A. Personnel

Name List each name, if known.	Position  List each position, if known.		Show annual sale	Compu ary rate & amount of time de		each name/positi	sition.				
		Salary	Rate	Time Worked (# of hours, days, months, years)	Percentage of Time	Total Cost	Non-Federal Contribution	Federal Request			
Alyssa Ryder	Analyst	\$49.96	hourly	120	100%	\$5,996	\$0	\$5,996			
Jessica McCarthy	Project Coordinator	\$48,490.00	yearly	1	100%	\$48,490	\$0	\$48,490			
To be Hired	Diversion Officer	\$84,292.00	yearly	1	100%	\$84,292	\$0	\$84,292			
					Total(s)	\$138,778	\$0	\$138,778			

#### Narrative

Overtime hours for the analyst who is on the current initiative to maintain a data base for opioid statistics and ODMAP entries through 2022. The analyst will use overtime hours at the rate set by the City of Duluth for this position to accomplish the required tasks.

Salary for current Opioid Program Technician who will manage the enhanced initiative through 2022.

Salary for one Duluth Police Department diversion officer at the investigator level who will provide a specialized police response to opioid abuse victims within the Lake Superior Drug and Violent Crime Task Force service area. This response will intervene with super users to provide follow up services after crises and alternatives to incarceration.

B. Fringe Benefits Name		Computation			
List each grant-supported position receiving fringe benefits.		Show the basis for computation.			
	Base	Rate	Total Cost	Non-Federal Contribution	Federal Request
Alyssa Ryder (Analyst)	\$5,996.00	16.35%	\$981	\$0	\$981
Jessica McCarthy	\$48,490.00	55.12%	\$26,728	\$0	\$26,728
Diversion Officer	\$84,292.00	51.20%	\$43,158	\$0	\$43,158
		Total(s)	\$70,867	\$0	\$70,867

Fringe benefits for a diversion officer salary. Some benefits are set, some are set percentages.

Medicare - 1.45%

Narrative

Retirement - 16.95%

Health Care Savings - 3% Medical Insurance - 29.10%

Dental Insurance - \$372.00 (.44%)

Life Insurance - \$204.00 (.24%)

Employee Assistance Program - \$13.44 (.02%)

Total = 51.20%

The Project Coordinator fringe benefit rate is 55.12% and covers the following items: Medicare (1.45%), FICA (6.2%), Unemployment (0.09%), Worker's Compensation (1.50%), Retirement (16.95%), Healthe Care Savings Plan (2.00%), Medical Insurance (26.20%), Dental Insurance (0.50%), Life Insurance (0.23%).

The Analyst overtime fringe benefit rate is 16.35% and covers the following items: Retirement (7.5%), FICA (6.2%), Medicare (1.45%), Unemployment (.07%), Workers Compensation (1.13%).

Purpose of Travel	Location	Type of Expense	Basis				Comp	utation		
Indicate the purpose of each trip or type of trip (training, advisory group meeting)	Indicate the travel destination.	Lodging, Meals, Etc. Per day, mile, trip, Etc. Compute the cost of each typ						ense X the numb	er of people travelin	ıg.
				Cost	Quantity	# of Staff	# of Trips	Total Cost	Non-Federal Contribution	Federal Request
Mandatory Face-to-Face 3-Day Meeting	Washington, D.C.	Transportation	Round-trip	\$800.00	1	2	1	\$1,600	\$0	\$1,600
Mandatory Face-to-Face 3-Day Meeting	Washington, D.C.	Local Travel	N/A	\$75.00	1	2	1	\$150	\$0	\$150
Mandatory Face-to-Face 3-Day Meeting	Washington, D.C.	Meals	Day	\$34.00	4.5	2	1,	\$306	\$0	\$306
Mandatory Face-to-Face 3-Day Meeting	Washington, D.C.	Lodging	Night	\$250.00	4	2	1	\$2,000	\$0	\$2,000
Mandatory Face-to-Face 3-Day Meeting	Washington, D.C.	Other	N/A	\$50.00	1	2	1	\$100	\$0	\$100
							Total(s)	\$4,156	\$0	\$4,156

Per mandatory award guidelines, two staff members must attend the mandatory 3-Day face-to-face meeting in Washington, D.C. We are following our own travel policy. Lodging is for 4 nights and meals are budgeted at 4.5 days. Travel days are computed at .75 days. Local transportation is for fare to and from the airport. Baggage fees are included at \$25 each way.

ltem		Computation			
List and describe each item of equipment that will be purchased	Compute the c	ost (e.g., the number of each item to be purch	ased X the cost p	oer item)	
	# of Items	Unit Cost	Total Cost	Non-Federal Contribution	Federal Request
			\$0		\$0
		Total(s)	\$0	\$0	\$0
arrative					

Supply Items	Computation  Describe the item and the compute the costs. Computation: The number of each item to be purchased X the cost per item.							
Provide a list of the types of items to be purchased with grant funds.								
	# of Items	Unit Cost	Total Cost	Non-Federal Contribution	Federal Request			
laloxone	300	\$80.00	\$24,000	\$0	\$24,000			
		Total(s)	\$24,000	\$0	\$24,000			

Naloxone kits will be purchased and distributed by the Project Coordinator to first responders of the agencies that are within the Lake Superior Drug and Violent Crime Task Force area of operation.

Purpose	Description of Work		Computation					
Provide the purpose of the construction	Describe the construction project(s)	Compute the costs (e.g., the number of each item to be purchased X the cost per item)						
		# of Items	Cost	Total Cost	Non-Federal Contribution	Federal Request		
				\$0		\$0		
			Total(s)	\$0	\$0	\$0		
arrative								

20011	tion	Purpose		Consul	tont?			
Provide a description of the acti subrecipie	ivities to be carried out by	Describe the purpose of the subaward (subgrant)		Is the subav consultant? the section explain as: travel exp included in	ward for a If yes, use below to sociated penses			
						Total Cost	Non-Federal Contribution	Federal Reques
						_		\$0
Consultant Travel (if necessary,					Total(s)	\$0	\$0	\$0
Purpose of Travel	Location	Type of Expense				Computation		
ndicate the purpose of each trip or type of trip (training, advisory group meeting)	Indicate the travel destination.	Hotel, airfare, per diem	Com	pute the cost c			number of people	traveling.
			Cost	Duration or Distance	# of Staff	Total Cost	Non-Federal Contribution	Federal Request
						\$0		\$0
					Total	\$0	\$0	\$0
arrative								
Narrative								
I. Procurement Contracts								

Dr. Jeff Mashs  Independent Evaluator  No 57,80 50  Center for Alcohol and Drug Treatment  One bed and treatment services for one year  No 5100,000 50  Total(s) \$107,280 \$0  Consultant Travel (if necessary)  Purpose of Travel Indicate the purpose of each trip or type of trip (indicate the travel destination.  Type of Expense  Computation  Cost or Olistance  Compute the cost of each type of expense X the number of people years X the number of years X the numbe			If yes, use below to sociated penses	Is the subaw consultant? I the section I explain ass travel exp included in t		Describe the purpose of the contract	ged to . A ements	Applicants are encouraged to in awarding contracts. A if for sole source procurements	Provide a description of the products of contract and an estimate of the costs.  promote free and open competition separate justification must be provided in excess of the Simplified Acquisition T
Center for Alcohol and Drug Treatment  One bed and treatment services for one year  No  \$100,000 \$0  Consultant Travel (if necessary)  Purpose of Travel Indicate the propose of each trip or type of trip (training, advisory group meeting)  Indicate the travel destination.  Hotel, airfare, per diem  Cost  Duration  For Distance  Total So  Non-Federal Contribution  No  S100,000 \$0  Computation  Computation  Compute the cost of each type of expense X the number of people of expense X the number of people of the cost of each type of expense X the number of people of the cost of each type of expense X the number of people of the cost of each type of expense X the number of people of the cost of each type of expense X the number of people of the cost of each type of expense X the number of people of the cost of each type of expense X the number of people of the cost of each type of expense X the number of people of the cost of each type of expense X the number of people of the cost of each type of expense X the number of people of the cost of each type of expense X the number of people of the cost of each type of expense X the number of people of the expense X the number of people of the cost of each type of expense X the number of people of the cost of each type of expense X the number of people of the expense X the number of people of the cost of each type of expense X the number of people of the expense X the number of people of the expense X the number of people of each tripe of expense X the number of people of the expense X the number of people of the expense X the number of each type of expense X the number of expense X the number of people of each tripe of expense X the number of each type of expense X the number of eac		Total Cost							
Consultant Travel (if necessary)  Purpose of Travel   Location   Type of Expense   Computation   Indicate the purpose of each trip or type of trip (training, advisory group meeting)   Indicate the travel destination.   Hotel, airfare, per diem   Cost   Duration or Distance   # of Staff   Total Cost Contribution   \$0   \$0   \$0   \$0   \$0   \$0   \$0   \$	\$0 \$7,28	\$7,280		No		Independent Evaluator			Dr. Jeff Maahs
Purpose of Travel Indicate the purpose of each trip or type of trip (training, advisory group meeting)  Indicate the travel destination.  Hotel, airfare, per diem  Cost Or Distance  Total Cost On Staff  Total Cost Contribution  Non-Federal Contribution  Non-Federal Contribution  Total Cost On Staff Cost On Staff Cost On Staff Contribution  Total Cost Contribution  Tota	\$0 \$100,0	\$100,000				One bed and treatment services for one year	(		Center for Alcohol and Drug Treatment
Purpose of Travel Indicate the purpose of each trip or type of trip (training, advisory group meeting)  Indicate the travel destination.  Indicate the purpose of each trip or Expense  Compute the cost of each type of expense X the number of people of the properties of the number of people of the purpose of the properties of the number of people of the purpose of the purpose of the properties of the number of people of the people of the properties of the number of people of the people of the properties of the number of people of the people of the properties of the number of people of the people of the properties of the number of people of expense X the number of people of the people of	0 \$0 \$107,2	\$107,280	Total(s)						
Indicate the purpose of each trip or type of trip (training, advisory group meeting)    Cost   Duration or Distance   # of Staff   Total Cost   Non-Federal Contribution	on	Computation				Type of Expense	ion		
Cost or Distance Staff Total Cost Contribution  \$0  Narrative  The Center for Alcohol and Drug Treatment will provide one bed for treatment services within their Pathfinder Unit that will be reserved for opioid abuse victims who will be referred to them through the Lake Superior Diversion Program. The cost calculation is based upon an average of 200 treatment days per year @ \$500.00 per treatment day.  The independent evaluator will support the project coordinator in the collection and analysis of data relevant to the goals of this program as well as help troubleshoot any page 1.				pute the cost o	Com				ndicate the purpose of each trip or type of trip (training, advisory
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	er treatment day.	\$500.00 per t	er year @ ram as we	ment days poor	of 200 treati o the goals	t calculation is based upon an average of ollection and analysis of data relevant t	on Program. The cost	ke Superior Diversion Pro support the project coord	eferred to them through the Lake The independent evaluator will s
I. Other Costs  Description Computation									

List and describe items that will be reproduction, telephone, janito investigative or col			Show the b	oasis for computation			
	Quantity	Basis	Cost	Length of Time	Total Cost	Non-Federal Contribution	Federal Request
					\$0		\$0
				Total(s)	\$0	\$0	\$0
		E					

<b>Description</b> Describe what the approved rate is and how it is applied.	Computation  Compute the indirect costs for those portions of the program which allow such costs.					
	Base	Indirect Cost Rate	Total Cost	Non-Federal Contribution	Federal Request	
			\$0		\$0	
		Total(s)	\$0	\$0	\$0	