|  |  |  |  |
| --- | --- | --- | --- |
| **Expenses** | **WCS request** | **Non-WCS funding** | **Total Project Budget** |
| **Salary and Benefits** |
| Name/Title/percent time | $ | $ | $ |
| Name/Title/percent time | $ | $ | $ |
| Benefits | $ | $ | $ |
| **Operating** |
| Contractors | $ | $ | $ |
| Travel | $ | $ | $ |
| Supplies | $ | $ | $ |
| Communications | $ | $ | $ |
| Equipment | $ | $ | $ |
| Other (list and add rows as needed) | $ | $ | $ |
| **Indirect Costs** |
| Indirect request can be a maximum 10% of direct costs above. | $ | $ | $ |
|  |
| **Totals** | $ | $ | $ |