DETAILED BUDGET FOR NEXT BUDGET PERIOD – DIRECT COSTS ONLY			FR	FROM		HROUGH	GRANT NUMBER	
List PERSONNEL (Applicant of Use Cal, Acad, or Summer to Enter Dollar Amounts Request	organization only) Enter Months Devo	ted to Project	sted a	and Fringe I	Benefits		1	
NAME	ROLE ON PRO	Ca	al.	Acad. Mnths	Summe Mnths		FRINGE BENEFITS	TOTALS
	PD/PI							
SUBTOTALS								
CONSULTANT COSTS								
EQUIPMENT (Itemize)								
SUPPLIES (Itemize by categor	n/)							
OCT 1 LILO (NOTHILO D) GALOGO	•97							
TRAVEL								
TRAVEL								
INPATIENT CARE COSTS								
OUTPATIENT CARE COSTS								
ALTERATIONS AND RENOVATIONS (Itemize by category)								
OTHER EXPENSES (Itemize by category)								
OTHER EXPENSES (Remize I	by calegory)							
SUBTOTAL DIRECT COSTS FOR NEXT BUDGET PERIOD								\$
CONSORTIUM/CONTRACTUAL COSTS DIRECT COSTS								
CONSORTIUM/CONTRACTUAL COSTS FACILITIES AND ADMINISTRATIVE COSTS								
TOTAL DIRECT COSTS FOR NEXT BUDGET PERIOD (Item 8a, Face Page)								\$