



EFNEP Budget Sheet Instructions

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April 2012

Visit the EFNEP FGO Webpage

EFNEP FGO Webpage -
[http://www.nifa.usda.gov/nea/food/efnep/
formula_grant.html](http://www.nifa.usda.gov/nea/food/efnep/formula_grant.html)

Review Budget Justification Instructions

Nutrition

EFNEP Formula Grant Opportunity (FGO)

Formula Grant Opportunity (FGO)

- EFNEP 2012 FGO
 - [Application Package and Instructions](#)
 - [FGO Overview and General Reporting Information](#)

EFNEP Specific Reporting Requirements

- [Checklist to Avoid Common Errors](#)
- 5-Year Plan
 - [Instructions](#)
 - [Template](#)
 - [Delivery Sites/Locations Chart \(word\)](#)
 - Training Webinars:
 - 5-year Plan: [Presentation](#) | [Handouts of Slides](#)
 - Program Priorities: [Presentation](#) | [Handout of Slides](#)
- Annual Update
 - [Coversheet and Instructions](#)
- Budget Sheet
 - [Instructions](#)
 - [Budget Spreadsheet \(excel\)](#)
 - [Allowable and Unallowable Expenses - Administrative Manual for the Smith Lever Act](#)
- Budget Justification
 - [Instructions](#)
- [Frequently Asked Questions](#)

Review Budget Justification Instructions

- Click on Budget Justification “Instructions”
- Review budget category descriptions
- Pay particular attention “Equipment”
- Consider your expenditures and where they fit

Obtain a Copy of the Budget Sheet

Nutrition

EFNEP Formula Grant Opportunity (FGO)

Formula Grant Opportunity (FGO)

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 - [Application Package and Instructions](#)
 - [FGO Overview and General Reporting Information](#)

EFNEP Specific Reporting Requirements

- [Checklist to Avoid Common Errors](#)
- 5-Year Plan
 - [Instructions](#)
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 - Training Webinars:
 - [5-year Plan: Presentation | Handouts of Slides](#)
 - [Program Priorities: Presentation | Handout of Slides](#)
- Annual Update
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 - [Instructions](#)
- [Frequently Asked Questions](#)

Obtain a Copy of the Budget Sheet

- Click on “Budget Spreadsheet (excel)”
- Select to save the file to your computer

Find your Current Allocation Amount

Nutrition

EFNEP Formula Grant Opportunity (FGO)

Formula Grant Opportunity (FGO)

- EFNEP 2012 FGO
 - [Application Package and Instructions](#) 
 - FGO Overview and General Reporting Information

EFNEP Specific Reporting Requirements

- [Checklist to Avoid Common Errors](#)
- 5-Year Plan
 - [Instructions](#)
 - [Template](#)
 - [Delivery Sites/Locations Chart \(word\)](#)
 - Training Webinars:
 - [5-year Plan: Presentation | Handouts of Slides](#)
 - [Program Priorities: Presentation | Handout of Slides](#)
- Annual Update
 - [Coversheet and Instructions](#)
- Budget Sheet
 - [Instructions](#)
 - [Budget Spreadsheet \(excel\)](#)
 - [Allowable and Unallowable Expenses - Administrative Manual for the Smith Lever Act](#)
- Budget Justification
 - [Instructions](#)
- [Frequently Asked Questions](#)

Find your Current Allocation Amount

- Click on FGO “Application Package and Instructions”
- Click on “Download Application Instructions” at the bottom of the page
- Go to the Appendix to find your current allocation amount

Open the Budget Sheet

	A	B	C	D	E	F	G	H
1	COOPERATIVE EXTENSION WORK SUMMARY BUDGET STATEMENT							
2	Expanded Food and Nutrition Education Program (EFNEP)							
3								
4								
5		State:					Estimated Carryover	
6		Institution:					Current Allocation	
7		Fiscal Year Ending: September 30,					Total Funds Available	\$ -
8								
9								
10	COOPERATIVE EXTENSION WORK BUDGET BY OBJECT CLASSIFICATION							
11								
12	EFNEP Funding		Salaries		Additional Expenses			Total Amount
13			FTE	Amount	Travel	Equipment	Other Expenses	
14	<i>Professional</i>							\$ -
15	<i>Paraprofessional/Technical</i>							\$ -
16	<i>Clerical & Secretarial</i>							\$ -
17	TOTAL		0.0	\$ -	\$ -	\$ -	\$ -	\$ -
18								
19	Other Sources of Funding (university, county, non-tax, etc.)							
20								\$ -
21								\$ -
22								\$ -
23								\$ -
24								\$ -
25								\$ -
26								\$ -
27	TOTAL OTHER FUNDS		0.0	\$ -	\$ -	\$ -	\$ -	\$ -
28	TOTAL ALL FUNDING		0.0	\$ -	\$ -	\$ -	\$ -	\$ -
29								
30								
31		Approved:						
32			<i>(Director or Administrator, State Extension Service)</i>					<i>(Date)</i>
33								

Enter your State: cell C5

	A	B	C	D	E	F	G	H
1	COOPERATIVE EXTENSION WORK SUMMARY BUDGET STATEMENT							
2	Expanded Food and Nutrition Education Program (EFNEP)							
3								
4								
5		State:					Estimated Carryover	
6		Institution:					Current Allocation	
7		Fiscal Year Ending: September 30,					Total Funds Available	\$ -
8								
9								
10	COOPERATIVE EXTENSION WORK BUDGET BY OBJECT CLASSIFICATION							
11								
12	EFNEP Funding		Salaries		Additional Expenses			Total Amount
13			FTE	Amount	Travel	Equipment	Other Expenses	
14	<i>Professional</i>							\$ -
15	<i>Paraprofessional/Technical</i>							\$ -
16	<i>Clerical & Secretarial</i>							\$ -
17	TOTAL		0.0	\$ -	\$ -	\$ -	\$ -	\$ -
18								
19	Other Sources of Funding (university, county, non-tax, etc.)							
20								\$ -
21								\$ -
22								\$ -
23								\$ -
24								\$ -
25								\$ -
26								\$ -
27	TOTAL OTHER FUNDS		0.0	\$ -	\$ -	\$ -	\$ -	\$ -
28	TOTAL ALL FUNDING		0.0	\$ -	\$ -	\$ -	\$ -	\$ -
29								
30								
31		Approved:						
32			<i>(Director or Administrator, State Extension Service)</i>					<i>(Date)</i>
33								

Enter your Institution: cell C6

	A	B	C	D	E	F	G	H
1	COOPERATIVE EXTENSION WORK SUMMARY BUDGET STATEMENT							
2	Expanded Food and Nutrition Education Program (EFNEP)							
3								
4								
5		State:					Estimated Carryover	
6		Institution:					Current Allocation	
7		Fiscal Year Ending: September 30,					Total Funds Available	\$ -
8								
9								
10	COOPERATIVE EXTENSION WORK BUDGET BY OBJECT CLASSIFICATION							
11								
12	EFNEP Funding	Salaries		Additional Expenses				
13		FTE	Amount	Travel	Equipment	Other Expenses	Total Amount	
14	<i>Professional</i>						\$ -	
15	<i>Paraprofessional/Technical</i>						\$ -	
16	<i>Clerical & Secretarial</i>						\$ -	
17	TOTAL	0.0	\$ -	\$ -	\$ -	\$ -	\$ -	
18								
19	Other Sources of Funding (university, county, non-tax, etc.)							
20							\$ -	
21							\$ -	
22							\$ -	
23							\$ -	
24							\$ -	
25							\$ -	
26							\$ -	
27	TOTAL OTHER FUNDS	0.0	\$ -	\$ -	\$ -	\$ -	\$ -	
28	TOTAL ALL FUNDING	0.0	\$ -	\$ -	\$ -	\$ -	\$ -	
29								
30								
31		Approved:						
32			<i>(Director or Administrator, State Extension Service)</i>					<i>(Date)</i>
33								

Enter the Fiscal Year: cell E7

	A	B	C	D	E	F	G	H	
1	COOPERATIVE EXTENSION WORK SUMMARY BUDGET STATEMENT								
2	Expanded Food and Nutrition Education Program (EFNEP)								
3									
4									
5		State:				Estimated Carryover			
6		Institution:				Current Allocation			
7		Fiscal Year Ending: September 30,				Total Funds Available	\$	-	
8									
9									
10	COOPERATIVE EXTENSION WORK BUDGET BY OBJECT CLASSIFICATION								
11									
12	EFNEP Funding	Salaries		Additional Expenses					
13		FTE	Amount	Travel	Equipment	Other Expenses	Total Amount		
14		<i>Professional</i>					\$	-	
15		<i>Paraprofessional/Technical</i>					\$	-	
16		<i>Clerical & Secretarial</i>					\$	-	
17		TOTAL	0.0	\$ -	\$ -	\$ -	\$ -	\$ -	
18									
19	Other Sources of Funding (university, county, non-tax, etc.)								
20							\$	-	
21							\$	-	
22							\$	-	
23							\$	-	
24							\$	-	
25							\$	-	
26							\$	-	
27		TOTAL OTHER FUNDS	0.0	\$ -	\$ -	\$ -	\$ -	\$ -	
28		TOTAL ALL FUNDING	0.0	\$ -	\$ -	\$ -	\$ -	\$ -	
29									
30									
31		Approved:							
32			<i>(Director or Administrator, State Extension Service)</i>						<i>(Date)</i>
33									

Enter Estimated Carryover: cell H5

	A	B	C	D	E	F	G	H
1	COOPERATIVE EXTENSION WORK SUMMARY BUDGET STATEMENT							
2	Expanded Food and Nutrition Education Program (EFNEP)							
3								
4								
5		State:					Estimated Carryover	
6		Institution:					Current Allocation	
7		Fiscal Year Ending: September 30,					Total Funds Available	\$ -
8								
9								
10	COOPERATIVE EXTENSION WORK BUDGET BY OBJECT CLASSIFICATION							
11								
12	EFNEP Funding	Salaries		Additional Expenses				
13		FTE	Amount	Travel	Equipment	Other Expenses	Total Amount	
14	<i>Professional</i>						\$ -	
15	<i>Paraprofessional/Technical</i>						\$ -	
16	<i>Clerical & Secretarial</i>						\$ -	
17	TOTAL	0.0	\$ -	\$ -	\$ -	\$ -	\$ -	
18								
19	Other Sources of Funding (university, county, non-tax, etc.)							
20								\$ -
21								\$ -
22								\$ -
23								\$ -
24								\$ -
25								\$ -
26								\$ -
27	TOTAL OTHER FUNDS	0.0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
28	TOTAL ALL FUNDING	0.0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
29								
30								
31		Approved:						
32			<i>(Director or Administrator, State Extension Service)</i>					<i>(Date)</i>
33								

Enter Current Allocation*: cell H6

	A	B	C	D	E	F	G	H
1	COOPERATIVE EXTENSION WORK SUMMARY BUDGET STATEMENT							
2	Expanded Food and Nutrition Education Program (EFNEP)							
3								
4								
5		State:					Estimated Carryover	
6		Institution:					Current Allocation	
7		Fiscal Year Ending: September 30,					Total Funds Available	\$ -
8								
9								
10	COOPERATIVE EXTENSION WORK BUDGET BY OBJECT CLASSIFICATION							
11								
12	EFNEP Funding	Salaries		Additional Expenses			Total Amount	
13		FTE	Amount	Travel	Equipment	Other Expenses		
14	<i>Professional</i>						\$ -	
15	<i>Paraprofessional/Technical</i>						\$ -	
16	<i>Clerical & Secretarial</i>						\$ -	
17	TOTAL	0.0	\$ -	\$ -	\$ -	\$ -	\$ -	
18								
19	Other Sources of Funding (university, county, non-tax, etc.)							
20								\$ -
21								\$ -
22								\$ -
23								\$ -
24								\$ -
25								\$ -
26								\$ -
27	TOTAL OTHER FUNDS	0.0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
28	TOTAL ALL FUNDING	0.0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
29								
30								
31		Approved:						
32			<i>(Director or Administrator, State Extension Service)</i>					<i>(Date)</i>
33								

*Current allocation amount can be found in the Appendix of the FGO Application Instructions

Verify that Total Funds Available Calculated Automatically*: cell H7

	A	B	C	D	E	F	G	H
1	COOPERATIVE EXTENSION WORK SUMMARY BUDGET STATEMENT							
2	Expanded Food and Nutrition Education Program (EFNEP)							
3								
4								
5		State:					Estimated Carryover	
6		Institution:					Current Allocation	
7		Fiscal Year Ending: September 30,					Total Funds Available	\$ -
8								
9								
10	COOPERATIVE EXTENSION WORK BUDGET BY OBJECT CLASSIFICATION							
11								
12	EFNEP Funding	Salaries		Additional Expenses				
13		FTE	Amount	Travel	Equipment	Other Expenses	Total Amount	
14								\$ -
15	<i>Professional</i>							\$ -
16	<i>Paraprofessional/Technical Clerical & Secretarial</i>							\$ -
17	TOTAL	0.0	\$ -	\$ -	\$ -	\$ -		\$ -
18								
19	Other Sources of Funding (university, county, non-tax, etc.)							
20								\$ -
21								\$ -
22								\$ -
23								\$ -
24								\$ -
25								\$ -
26								\$ -
27	TOTAL OTHER FUNDS	0.0	\$ -	\$ -	\$ -	\$ -		\$ -
28	TOTAL ALL FUNDING	0.0	\$ -	\$ -	\$ -	\$ -		\$ -
29								
30								
31		Approved:						
32			<i>(Director or Administrator, State Extension Service)</i>					<i>(Date)</i>
33								

*If total does not calculate automatically, enter the total amount

Enter Professional FTE*, Salary and Additional Expenses: cells C14-G14

	A	B	C	D	E	F	G	H
1	COOPERATIVE EXTENSION WORK SUMMARY BUDGET STATEMENT							
2	Expanded Food and Nutrition Education Program (EFNEP)							
3								
4								
5		State:					Estimated Carryover	
6		Institution:					Current Allocation	
7		Fiscal Year Ending: September 30,					Total Funds Available	\$ -
8								
9								
10	COOPERATIVE EXTENSION WORK BUDGET BY OBJECT CLASSIFICATION							
11								
12	EFNEP Funding	Salaries		Additional Expenses				
13		FTE	Amount	Travel	Equipment	Other Expenses	Total Amount	
14	<i>Professional</i>						-	
15	<i>Paraprofessional/Technical</i>						-	
16	<i>Clerical & Secretarial</i>						-	
17	TOTAL	0.0	\$ -	\$ -	\$ -	\$ -	\$ -	
18								
19	Other Sources of Funding (university, county, non-tax, etc.)							
20								-
21								-
22								-
23								-
24								-
25								-
26								-
27	TOTAL OTHER FUNDS	0.0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
28	TOTAL ALL FUNDING	0.0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
29								
30								
31		Approved:						
32			<i>(Director or Administrator, State Extension Service)</i>					<i>(Date)</i>
33								

*FTE stands for Full Time Equivalent. One FTE = 2080 hrs. per year

Verify that Professional Total Amount Calculated Automatically: cell H14

	A	B	C	D	E	F	G	H
1	COOPERATIVE EXTENSION WORK SUMMARY BUDGET STATEMENT							
2	Expanded Food and Nutrition Education Program (EFNEP)							
3								
4								
5		State:					Estimated Carryover	
6		Institution:					Current Allocation	
7		Fiscal Year Ending: September 30,					Total Funds Available	\$ -
8								
9								
10	COOPERATIVE EXTENSION WORK BUDGET BY OBJECT CLASSIFICATION							
11								
12	EFNEP Funding	Salaries		Additional Expenses				
13		FTE	Amount	Travel	Equipment	Other Expenses	Total Amount	
14	<i>Professional</i>						\$ -	
15	<i>Paraprofessional/Technical</i>						\$ -	
16	<i>Clerical & Secretarial</i>						\$ -	
17	TOTAL	0.0	\$ -	\$ -	\$ -	\$ -	\$ -	
18								
19	Other Sources of Funding (university, county, non-tax, etc.)							
20								\$ -
21								\$ -
22								\$ -
23								\$ -
24								\$ -
25								\$ -
26								\$ -
27	TOTAL OTHER FUNDS	0.0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
28	TOTAL ALL FUNDING	0.0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
29								
30								
31		Approved:						
32			<i>(Director or Administrator, State Extension Service)</i>					<i>(Date)</i>
33								

*If total does not calculate automatically, enter the total amount

Enter Paraprofessional FTE*, Salary and Additional Expenses: cells C15-G15

	A	B	C	D	E	F	G	H
1	COOPERATIVE EXTENSION WORK SUMMARY BUDGET STATEMENT							
2	Expanded Food and Nutrition Education Program (EFNEP)							
3								
4								
5	State:					Estimated Carryover		
6	Institution:					Current Allocation		
7	Fiscal Year Ending: September 30,					Total Funds Available		\$ -
8								
9								
10	COOPERATIVE EXTENSION WORK BUDGET BY OBJECT CLASSIFICATION							
11								
12	EFNEP Funding	Salaries		Additional Expenses			Total Amount	
13		FTE	Amount	Travel	Equipment	Other Expenses		
14	<i>Professional</i>						\$ -	
15	<i>Paraprofessional/Technical</i>						\$ -	
16	<i>Clerical & Secretarial</i>						\$ -	
17	TOTAL	0.0	\$ -	\$ -	\$ -	\$ -	\$ -	
18								
19	Other Sources of Funding (university, county, non-tax, etc.)							
20								\$ -
21								\$ -
22								\$ -
23								\$ -
24								\$ -
25								\$ -
26								\$ -
27	TOTAL OTHER FUNDS	0.0	\$ -	\$ -	\$ -	\$ -	\$ -	
28	TOTAL ALL FUNDING	0.0	\$ -	\$ -	\$ -	\$ -	\$ -	
29								
30								
31	Approved:							
32								(Date)
33								

*FTE stands for Full Time Equivalent. One FTE = 2080 hrs. per year

Verify that Paraprofessional Total Amount Calculated Automatically*: cell H15

	A	B	C	D	E	F	G	H
1	COOPERATIVE EXTENSION WORK SUMMARY BUDGET STATEMENT							
2	Expanded Food and Nutrition Education Program (EFNEP)							
3								
4								
5		State:					Estimated Carryover	
6		Institution:					Current Allocation	
7		Fiscal Year Ending: September 30,					Total Funds Available	\$ -
8								
9								
10	COOPERATIVE EXTENSION WORK BUDGET BY OBJECT CLASSIFICATION							
11								
12	EFNEP Funding	Salaries		Additional Expenses				
13		FTE	Amount	Travel	Equipment	Other Expenses	Total Amount	
14	<i>Professional</i>						\$ -	
15	<i>Paraprofessional/Technical</i>						\$ -	
16	<i>Clerical & Secretarial</i>						\$ -	
17	TOTAL	0.0	\$ -	\$ -	\$ -	\$ -	\$ -	
18								
19	Other Sources of Funding (university, county, non-tax, etc.)							
20								\$ -
21								\$ -
22								\$ -
23								\$ -
24								\$ -
25								\$ -
26								\$ -
27	TOTAL OTHER FUNDS	0.0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
28	TOTAL ALL FUNDING	0.0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
29								
30								
31		Approved:						
32			<i>(Director or Administrator, State Extension Service)</i>					<i>(Date)</i>
33								

*If total does not calculate automatically, enter the total amount

**! Paraprofessional Total
must be at least 60% of
Total Funds Available**

(see Policy: <http://www.nifa.usda.gov/nea/food/efnep/pdf/program-policy.pdf>)

To calculate % of funds allocated in support of paraprofessional staff: divide the “Total Amount” for Paraprofessionals by the “Total Funds Available”

Hint: Cell I15 (“eye”15) automatically calculates the above value. If cell I15 is less than 60% it will turn red indicating the budget needs to be revised

Enter Clerical & Secretarial FTE*, Salary and Additional Expenses: cells C16-G16

	A	B	C	D	E	F	G	H
1	COOPERATIVE EXTENSION WORK SUMMARY BUDGET STATEMENT							
2	Expanded Food and Nutrition Education Program (EFNEP)							
3								
4								
5		State:					Estimated Carryover	
6		Institution:					Current Allocation	
7		Fiscal Year Ending: September 30,					Total Funds Available	\$ -
8								
9								
10	COOPERATIVE EXTENSION WORK BUDGET BY OBJECT CLASSIFICATION							
11								
12	EFNEP Funding	Salaries		Additional Expenses				
13		FTE	Amount	Travel	Equipment	Other Expenses	Total Amount	
14	<i>Professional</i>						\$ -	
15	<i>Paraprofessional/Technical</i>						\$ -	
16	Clerical & Secretarial						\$ -	
17	TOTAL	0.0	\$ -	\$ -	\$ -	\$ -	\$ -	
18								
19	Other Sources of Funding (university, county, non-tax, etc.)							
20								\$ -
21								\$ -
22								\$ -
23								\$ -
24								\$ -
25								\$ -
26								\$ -
27	TOTAL OTHER FUNDS	0.0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
28	TOTAL ALL FUNDING	0.0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
29								
30								
31		Approved:						
32			<i>(Director or Administrator, State Extension Service)</i>					<i>(Date)</i>
33								

*FTE is Full Time Equivalent (FTE). One FTE = 2080 hrs. per year

Verify that Clerical & Secretarial Total Amounts Calculated Automatically*: cell H16

	A	B	C	D	E	F	G	H
1	COOPERATIVE EXTENSION WORK SUMMARY BUDGET STATEMENT							
2	Expanded Food and Nutrition Education Program (EFNEP)							
3								
4								
5		State:					Estimated Carryover	
6		Institution:					Current Allocation	
7		Fiscal Year Ending: September 30,					Total Funds Available	\$ -
8								
9								
10	COOPERATIVE EXTENSION WORK BUDGET BY OBJECT CLASSIFICATION							
11								
12	EFNEP Funding	Salaries		Additional Expenses				
13		FTE	Amount	Travel	Equipment	Other Expenses	Total Amount	
14	<i>Professional</i>						\$ -	
15	<i>Paraprofessional/Technical</i>						\$ -	
16	<i>Clerical & Secretarial</i>						\$ -	
17	TOTAL	0.0	\$ -	\$ -	\$ -	\$ -	\$ -	
18								
19	Other Sources of Funding (university, county, non-tax, etc.)							
20								\$ -
21								\$ -
22								\$ -
23								\$ -
24								\$ -
25								\$ -
26								\$ -
27	TOTAL OTHER FUNDS	0.0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
28	TOTAL ALL FUNDING	0.0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
29								
30								
31		Approved:						
32			<i>(Director or Administrator, State Extension Service)</i>					<i>(Date)</i>
33								

*If total does not calculate automatically, enter the total amount

Verify that Column Totals Calculated Automatically*: cells C17-H17

	A	B	C	D	E	F	G	H	
1	COOPERATIVE EXTENSION WORK SUMMARY BUDGET STATEMENT								
2	Expanded Food and Nutrition Education Program (EFNEP)								
3									
4									
5		State:					Estimated Carryover		
6		Institution:					Current Allocation		
7		Fiscal Year Ending: September 30,					Total Funds Available	\$ -	
8									
9									
10	COOPERATIVE EXTENSION WORK BUDGET BY OBJECT CLASSIFICATION								
11									
12	EFNEP Funding	Salaries		Additional Expenses					
13		FTE	Amount	Travel	Equipment	Other Expenses	Total Amount		
14	<i>Professional</i>							\$ -	
15	<i>Paraprofessional/Technical</i>							\$ -	
16	<i>Clerical & Secretarial</i>							\$ -	
17	TOTAL	0.0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	
18									
19	Other Sources of Funding (university, county, non-tax, etc.)								
20								\$ -	
21								\$ -	
22								\$ -	
23								\$ -	
24								\$ -	
25								\$ -	
26								\$ -	
27	TOTAL OTHER FUNDS	0.0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	
28	TOTAL ALL FUNDING	0.0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	
29									
30									
31		Approved:							
32			<i>(Director or Administrator, State Extension Service)</i>						<i>(Date)</i>
33									

*If totals do not calculate automatically, enter the total amounts

Verify that cell H7 Total Funds Available Equals cell H17 Total Amount

	A	B	C	D	E	F	G	H	
1	COOPERATIVE EXTENSION WORK SUMMARY BUDGET STATEMENT								
2	Expanded Food and Nutrition Education Program (EFNEP)								
3									
4									
5		State:				Estimated Carryover	\$	-	
6		Institution:				Current Allocation			
7		Fiscal Year Ending: September 30,				Total Funds Available	\$	-	
8									
9									
10	COOPERATIVE EXTENSION WORK BUDGET BY OBJECT CLASSIFICATION								
11									
12	EFNEP Funding	Salaries		Additional Expenses			Total Amount		
13		FTE	Amount	Travel	Equipment	Other Expenses			
14	<i>Professional</i>						\$	-	
15	<i>Paraprofessional/Technical</i>						\$	-	
16	<i>Clerical & Secretarial</i>						\$	-	
17	TOTAL	0.0	\$ -	\$ -	\$ -	\$ -	\$	-	
18									
19	Other Sources of Funding (university, county, non-tax, etc.)								
20							\$	-	
21							\$	-	
22							\$	-	
23							\$	-	
24							\$	-	
25							\$	-	
26							\$	-	
27	TOTAL OTHER FUNDS	0.0	\$ -	\$ -	\$ -	\$ -	\$	-	
28	TOTAL ALL FUNDING	0.0	\$ -	\$ -	\$ -	\$ -	\$	-	
29									
30									
31		Approved:							
32			<i>(Director or Administrator, State Extension Service)</i>						<i>(Date)</i>

Verify that cell H7 Total Funds Available Equals cell H17 Total Amount

***Hint:** If your Total Funds Available does not equal your Total Amount, cell H17 will turn yellow and you will get a red message in cell I17 (“eye” 17) indicating “Your total funds available do not equal your total”.*

List Other Sources of EFNEP Funding

	A	B	C	D	E	F	G	H	
1	COOPERATIVE EXTENSION WORK SUMMARY BUDGET STATEMENT								
2	Expanded Food and Nutrition Education Program (EFNEP)								
3									
4									
5		State:				Estimated Carryover	\$	-	
6		Institution:				Current Allocation			
7		Fiscal Year Ending: September 30,				Total Funds Available	\$	-	
8									
9									
10	COOPERATIVE EXTENSION WORK BUDGET BY OBJECT CLASSIFICATION								
11									
12	EFNEP Funding	Salaries		Additional Expenses					
13		FTE	Amount	Travel	Equipment	Other Expenses	Total Amount		
14		<i>Professional</i>					\$	-	
15		<i>Paraprofessional/Technical</i>					\$	-	
16		<i>Clerical & Secretarial</i>					\$	-	
17		TOTAL	0.0	\$ -	\$ -	\$ -	\$ -	\$ -	
18									
19	Other Sources of Funding (university, county, non-tax, etc.)								
20							\$	-	
21							\$	-	
22							\$	-	
23							\$	-	
24							\$	-	
25							\$	-	
26							\$	-	
27		TOTAL OTHER FUNDS	0.0	\$ -	\$ -	\$ -	\$ -	\$ -	
28		TOTAL ALL FUNDING	0.0	\$ -	\$ -	\$ -	\$ -	\$ -	
29									
30									
31		Approved:							
32			<i>(Director or Administrator, State Extension Service)</i>						<i>(Date)</i>

Name Other Sources of Funding: cells A20-A26 (add rows as needed*)

	A	B	C	D	E	F	G	H	
1	COOPERATIVE EXTENSION WORK SUMMARY BUDGET STATEMENT								
2	Expanded Food and Nutrition Education Program (EFNEP)								
3									
4									
5		State:				Estimated Carryover	\$	-	
6		Institution:				Current Allocation			
7		Fiscal Year Ending: September 30,				Total Funds Available	\$	-	
8									
9									
10	COOPERATIVE EXTENSION WORK BUDGET BY OBJECT CLASSIFICATION								
11									
12	EFNEP Funding	Salaries		Additional Expenses					
13		FTE	Amount	Travel	Equipment	Other Expenses	Total Amount		
14	<i>Professional</i>						\$	-	
15	<i>Paraprofessional/Technical</i>						\$	-	
16	<i>Clerical & Secretarial</i>						\$	-	
17	TOTAL	0.0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	
18									
19	Other Sources of Funding (university, county, non-tax, etc.)								
20								\$ -	
21								\$ -	
22								\$ -	
23								\$ -	
24								\$ -	
25								\$ -	
26								\$ -	
27	TOTAL OTHER FUNDS	0.0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	
28	TOTAL ALL FUNDING	0.0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	
29									
30									
31		Approved:							
32			<i>(Director or Administrator, State Extension Service)</i>						<i>(Date)</i>

* ! If rows are added formulas to calculate totals may need to be adjusted

Enter FTE, Salary, and Additional Expenses for Other Sources of Funding: cells C20-G26

	A	B	C	D	E	F	G	H
1	COOPERATIVE EXTENSION WORK SUMMARY BUDGET STATEMENT							
2	Expanded Food and Nutrition Education Program (EFNEP)							
3								
4								
5		State:					Estimated Carryover	
6		Institution:					Current Allocation	
7		Fiscal Year Ending: September 30,					Total Funds Available	\$ -
8								
9								
10	COOPERATIVE EXTENSION WORK BUDGET BY OBJECT CLASSIFICATION							
11								
12	EFNEP Funding	Salaries		Additional Expenses				
13		FTE	Amount	Travel	Equipment	Other Expenses	Total Amount	
14	<i>Professional</i>						\$ -	
15	<i>Paraprofessional/Technical</i>						\$ -	
16	<i>Clerical & Secretarial</i>						\$ -	
17	TOTAL	0.0	\$ -	\$ -	\$ -	\$ -	\$ -	
18								
19	Other Sources of Funding (university, county, non-tax, etc.)							
20								\$ -
21								\$ -
22								\$ -
23								\$ -
24								\$ -
25								\$ -
26								\$ -
27	TOTAL OTHER FUNDS	0.0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
28	TOTAL ALL FUNDING	0.0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
29								
30								
31		Approved:						
32			<i>(Director or Administrator, State Extension Service)</i>					<i>(Date)</i>
33								

! If rows are added formulas to calculate totals may need to be adjusted

Verify that Other Sources of Funding Total Amounts Calculated Automatically: cells H20-26

	A	B	C	D	E	F	G	H
1	COOPERATIVE EXTENSION WORK SUMMARY BUDGET STATEMENT							
2	Expanded Food and Nutrition Education Program (EFNEP)							
3								
4								
5		State:				Estimated Carryover		
6		Institution:				Current Allocation		
7		Fiscal Year Ending: September 30,				Total Funds Available		
8								\$ -
9								
10	COOPERATIVE EXTENSION WORK BUDGET BY OBJECT CLASSIFICATION							
11								
12	EFNEP Funding		Salaries		Additional Expenses			Total Amount
13			FTE	Amount	Travel	Equipment	Other Expenses	
14	<i>Professional</i>							\$ -
15	<i>Paraprofessional/Technical</i>							\$ -
16	<i>Clerical & Secretarial</i>							\$ -
17	TOTAL		0.0	\$ -	\$ -	\$ -	\$ -	\$ -
18								
19	Other Sources of Funding (university, county, non-tax, etc.)							
20								\$ -
21								\$ -
22								\$ -
23								\$ -
24								\$ -
25								\$ -
26								\$ -
27	TOTAL OTHER FUNDS		0.0	\$ -	\$ -	\$ -	\$ -	\$ -
28	TOTAL ALL FUNDING		0.0	\$ -	\$ -	\$ -	\$ -	\$ -
29								
30								
31		Approved:						
32		<i>(Director or Administrator, State Extension Service)</i>						<i>(Date)</i>

*If total does not calculate automatically, enter the total amount;

! If rows are added formulas to calculate totals may need to be adjusted

Verify that Totals for Other Funds Calculated Automatically: cells C27-H27

	A	B	C	D	E	F	G	H
1	COOPERATIVE EXTENSION WORK SUMMARY BUDGET STATEMENT							
2	Expanded Food and Nutrition Education Program (EFNEP)							
3								
4								
5		State:					Estimated Carryover	
6		Institution:					Current Allocation	
7		Fiscal Year Ending: September 30,					Total Funds Available	\$ -
8								
9								
10	COOPERATIVE EXTENSION WORK BUDGET BY OBJECT CLASSIFICATION							
11								
12	EFNEP Funding	Salaries		Additional Expenses				
13		FTE	Amount	Travel	Equipment	Other Expenses	Total Amount	
14	<i>Professional</i>						\$ -	
15	<i>Paraprofessional/Technical</i>						\$ -	
16	<i>Clerical & Secretarial</i>						\$ -	
17	TOTAL	0.0	\$ -	\$ -	\$ -	\$ -	\$ -	
18								
19	Other Sources of Funding (university, county, non-tax, etc.)							
20								\$ -
21								\$ -
22								\$ -
23								\$ -
24								\$ -
25								\$ -
26								\$ -
27	TOTAL OTHER FUNDS	0.0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
28	TOTAL ALL FUNDING	0.0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
29								
30								
31		Approved:						
32			<i>(Director or Administrator, State Extension Service)</i>					<i>(Date)</i>
33								

*If total does not calculate automatically, enter the total amount;

! If rows are added formulas to calculate totals may need to be adjusted

Verify that Totals for All Funding Sources Calculated Automatically: cells C28-H28

	A	B	C	D	E	F	G	H
1	COOPERATIVE EXTENSION WORK SUMMARY BUDGET STATEMENT							
2	Expanded Food and Nutrition Education Program (EFNEP)							
3								
4								
5		State:					Estimated Carryover	
6		Institution:					Current Allocation	
7		Fiscal Year Ending: September 30,					Total Funds Available	\$ -
8								
9								
10	COOPERATIVE EXTENSION WORK BUDGET BY OBJECT CLASSIFICATION							
11								
12	EFNEP Funding	Salaries		Additional Expenses				
13		FTE	Amount	Travel	Equipment	Other Expenses	Total Amount	
14	<i>Professional</i>						\$ -	
15	<i>Paraprofessional/Technical</i>						\$ -	
16	<i>Clerical & Secretarial</i>						\$ -	
17	TOTAL	0.0	\$ -	\$ -	\$ -	\$ -	\$ -	
18								
19	Other Sources of Funding (university, county, non-tax, etc.)							
20								\$ -
21								\$ -
22								\$ -
23								\$ -
24								\$ -
25								\$ -
26								\$ -
27	TOTAL OTHER FUNDS	0.0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
28	TOTAL ALL FUNDING	0.0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
29								
30								
31		Approved:						
32			<i>(Director or Administrator, State Extension Service)</i>					<i>(Date)</i>
33								

*If total does not calculate automatically, enter the total amount

Obtain a Signature from your Extension Director or Administrator

	A	B	C	D	E	F	G	H
1	COOPERATIVE EXTENSION WORK SUMMARY BUDGET STATEMENT							
2	Expanded Food and Nutrition Education Program (EFNEP)							
3								
4								
5		State:					Estimated Carryover	
6		Institution:					Current Allocation	
7		Fiscal Year Ending: September 30,					Total Funds Available	\$ -
8								
9								
10	COOPERATIVE EXTENSION WORK BUDGET BY OBJECT CLASSIFICATION							
11								
12	EFNEP Funding	Salaries		Additional Expenses			Total Amount	
13		FTE	Amount	Travel	Equipment	Other Expenses		
14	<i>Professional</i>						\$ -	
15	<i>Paraprofessional/Technical</i>						\$ -	
16	<i>Clerical & Secretarial</i>						\$ -	
17	TOTAL	0.0	\$ -	\$ -	\$ -	\$ -	\$ -	
18								
19	Other Sources of Funding (university, county, non-tax, etc.)							
20								\$ -
21								\$ -
22								\$ -
23								\$ -
24								\$ -
25								\$ -
26								\$ -
27	TOTAL OTHER FUNDS	0.0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
28	TOTAL ALL FUNDING	0.0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
29								
30								
31		Approved:						
32			<i>(Director or Administrator, State Extension Service)</i>					<i>(Date)</i>
33								

! The Budget Sheet must be signed by your Extension Director or Administrator.

Prepare the Budget Justification

- Follow the Budget Justification Instructions
- Make sure the Budget Justification aligns with the Budget Sheet.

Check Your Work

Nutrition

EFNEP Formula Grant Opportunity (FGO)

Formula Grant Opportunity (FGO)

- EFNEP 2012 FGO
 - [Application Package and Instructions](#)
 - [FGO Overview and General Reporting Information](#)

EFNEP Specific Reporting Requirements

- [Checklist to Avoid Common Errors](#) 
- 5-Year Plan
 - [Instructions](#)
 - [Template](#)
 - [Delivery Sites/Locations Chart \(word\)](#)
 - Training Webinars:
 - [5-year Plan: Presentation | Handouts of Slides](#)
 - [Program Priorities: Presentation | Handout of Slides](#)
- Annual Update
 - [Coversheet and Instructions](#)
- Budget Sheet
 - [Instructions](#)
 - [Budget Spreadsheet \(excel\)](#)
 - [Allowable and Unallowable Expenses - Administrative Manual for the Smith Lever Act](#)
- Budget Justification
 - [Instructions](#)
- [Frequently Asked Questions](#)

Check Your Work

- Click on “Checklist to Avoid Common Errors”
- Go through the checklist
- Make revisions to the budget and budget justification as needed

Save and Submit

- Save the budget files as PDF documents using Adobe 8.1.1 or higher.
- Review the FGO “Application Instructions” for submission information

Contact NIFA for Additional Information

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