

## PROPOSED BUDGET: Opioid Settlement Funds – Mecosta County

**Organization Name:**

*Project Period:*

Line Items	Requested Amount through April 30, 2026	Cost Justification
<b>Personnel (Name)</b>		
	\$	
<b>Personnel Subtotal</b>	\$	
<b>Fringe Benefits (%)</b>	\$	
<b>Travel</b>		
	\$	
<b>Travel Subtotal</b>	\$	
<b>Equipment</b>		
	\$	
<b>Equipment Subtotal</b>	\$	
<b>Supplies</b>		
	\$	
<b>Supplies Subtotal</b>	\$ -	
<b>Contractual Costs</b>		
	\$	
<b>Contractual Subtotal</b>	\$	
<b>Other</b>		
	\$	
<b>Other Subtotal:</b>	\$	
<b>Subtotals of Direct costs</b>		
<b>Indirect (%)</b>		
<b>Grand Total</b>	\$	

**SUMMARY BUDGET – Mecosta County Opioid Settlement Funds**  
**April 30, 2025 – March 31, 2026**

**Organization Name:**

Period 1 (April 30, 2025 - March 31, 2026)			Total Requested Funds	% Total Budget
<b>A</b>	<b>Personnel</b>	\$	\$	
<b>B</b>	<b>Fringe Benefits</b>	\$	\$	
<b>C</b>	<b>Travel</b>	\$	\$	
<b>D</b>	<b>Equipment</b>	\$	\$	
<b>E</b>	<b>Supplies</b>	\$	\$	
<b>F</b>	<b>Contractual</b>	\$	\$	
<b>H</b>	<b>Other</b>	\$	\$	
<b>J</b>	<b>Total Indirect costs</b>	\$	\$	
<b>K</b>	<b>Total</b>	\$	\$	