

Attachment B

Budget & Budget Narrative

Please list cost per service per night in the following table(s). Please enter the maximum number of people you can serve per night. Please limit your budget and budget narrative response to 2 pages.

Required Costs for Sheltering:

Service/Provision	Cost Per Night for ____ People (Enter maximum number of people you can serve per night)
Facility/Room Rate (please specify congregate/communal or non-congregate/private room)	
Meals (2 per day)	
Staffing	
Security	
Communications	
Supplies	
PPE	
Administrative Costs (10%)	
Other	
Total Cost	
Total Cost per Person per Night (divide total cost by maximum number of people you can serve)	

*If \$0 cost for any of the above, please explain how you will provide that service in the narrative; per night for the max number of people you can serve.

Optional Costs:

Service/Provision	Cost Per Night for ____ People (Enter maximum number of people you can serve per night)
Transportation	
Pets	

Budget Narrative (Optional):

Please provide any further explanation as needed to support your budget above.