

**NORTH CAROLINA COUNCIL ON DEVELOPMENTAL DISABILITIES (NCCDD)
BUDGET SUMMARY AND NARRATIVE
CONFERENCE FUNDING**

CONFERENCE TITLE:
AGENCY NAME:
BUDGET: Please fill in dollar amounts in the budget categories below. TOTAL PROGRAM COST must equal the sum of the MATCHING SHARE (cash and/or in-kind) plus the NCCDD FUNDS REQUIRED . All costs to be reimbursed by federal funds must be used for the conduct of the conference. The following budget categories are a summary of costs considered "allowable," but is not all inclusive. Exclusion of an item from this list does not necessarily mean it is unallowable.

BUDGET CATEGORY	BUDGET			TOTAL PROGRAM COST
	NCCDD FUNDS REQUIRED	MATCH		
		CASH	IN-KIND	
OTHER (Description: The Other category may include speaker fee, speaker travel expenses and miscellaneous expenses such as training/meeting materials, printing/copies, postage/mail, etc.)				
SPEAKER FEE				\$0.00
SPEAKER TRAVEL				\$0.00
MISC EXPENSES				\$0.00
TOTAL OTHER	\$0.00	\$0.00	\$0.00	\$0.00
REMARKS:				

CERTIFICATION BY OFFICIAL AUTHORIZED TO MAKE COMMITMENT

It is understood that non-federal resources identified in this budget will be used to match only NC Council on Developmental Disabilities' federal funds, and will not be used to match any other federal funds during the period of the NCCDD funded conference.

NAME & TITLE

DATE

SIGNATURE