

SNAP Outreach Partner Annual Budget

FFY 2024: October 1, 2024 – September 30, 2025

Agency Name and Address:

City of Somerville, MA

*Required

Department of Health and Human Services - Community Health Workers Division

*Required

50 Evergreen Ave, Somerville, MA 02145

*Required

Budget Summary Table

Entries made in detail tables will automatically update this table

BUDGET CATEGORY	TOTAL FUNDS	APPLICATION ACTIVITY FUNDS	OUTREACH ACTIVITY FUNDS	
FTE's	0.70	0.53	0.17	
Salaries	42,862.25	32,451.12	10,411.13	
Fringe Benefits	2,856.99	2,163.01	693.98	
Operating Costs	2,400.00	2,050.00	350.00	
Building Expenses	-	-	-	
Equipment	-	-	-	
Travel	67.00	50.25	16.75	
Other Costs	-	-	-	
Indirect Costs	4,818.61	3,671.43	1,147.18	
TOTAL	53,004.85	40,385.81	12,619.04	Total Reimbursement Amount: \$ 26,502.43 Application Goal:

SNAP Outreach Partner Annual Budget

SNAP Application Assistance Activity Budget
 FFY 2024: October 1, 2024 – September 30, 2025

Agency Name and Address:

City of Somerville, MA *Required
Department of Health and Human Services - Community Health Workers Division *Required
50 Evergreen Ave, Somerville, MA 02145 *Required

Application Activity

- SNAP Eligibility Screening
- Assisting with SNAP Application
- Helping with Verification Gathering
- Application Interview Assistance
- Conducting application assistance where low income people gather
- Translation of SNAP materials and bilingual accommodation

Recertification Activity

- Recertification Activities

Non-Reimbursable Activity

- Placement of advertisements on radio, television, print or electronic media

This budget must only represent 75% of your overall budget amount

Budget Summary Table (Application Assistance Activity)				
Entries made in detail tables will automatically update this table				
BUDGET CATEGORY	TOTAL FUNDS	LOCAL FUNDS	STATE FUNDS	FEDERAL FUNDS (CDBG)
FTE's	0.53			
Salaries	32,451.12	32,451.12	-	-
Fringe Benefits	2,163.01	2,163.01	-	-
Operating Costs	2,050.00	2,050.00	-	-
Building Expenses	-	-	-	-
Equipment	-	-	-	-
Travel	50.25	50.25	-	-
Other Costs	-	-	-	-
Indirect Costs	3,671.43	3,671.43	-	-
TOTAL	40,385.81	40,385.81	-	-

SOURCE OF APPLICATION ASSISTANCE FUNDING					
<i>Please list anticipated funding sources</i>					
FUNDING SOURCE	DESCRIPTION	TOTAL FUNDS	LOCAL FUNDS	STATE FUNDS	FEDERAL FUNDS (CDBG)
City of Somerville, MA	HHS CHW Division Operating Fund	40,385.81	40,385.81	-	-
		-	-	-	-
		-	-	-	-
		-	-	-	-
TOTAL		40,385.81	40,385.81	-	-

Schedule of Personnel Expenses (Salary) 0						
TITLE OF POSITION	LOCATION	% OF FTE	TOTAL FUNDS	LOCAL FUNDS	STATE FUNDS	FEDERAL FUNDS (CDBG)
Community Health Worker Manager	Somerville	8.00%	6,088.68	6,088.68	-	-
Community Health Worker	Somerville	15.00%	8,787.48	8,787.48	-	-
Community Health Worker	Somerville	15.00%	8,787.48	8,787.48	-	-
Community Health Worker	Somerville	15.00%	8,787.48	8,787.48	-	-
		0.00%	-	-	-	-
		0.00%	-	-	-	-
TOTAL		53%	32,451.12	32,451.12	-	-

Personal Benefits (Fringe) 0

TITLE OF POSITION	LOCATION	% OF FTE	TOTAL BENEFITS	LOCAL FUNDS	STATE FUNDS	FEDERAL FUNDS (CDBG)
Community Health Worker Manager	Somerville	7.00%	405.51	405.51	-	-
Community Health Worker	Somerville	10.00%	878.75	878.75	-	-
Community Health Worker	Somerville	10.00%	878.75	878.75	-	-
			-	-	-	-
		0.00%	-	-	-	-
		0.00%	-	-	-	-
TOTAL		27%	2,163.01	2,163.01	-	-

Operating Costs 0

ITEM NAME	DESCRIPTION	TOTAL FUNDS	LOCAL FUNDS	STATE FUNDS	FEDERAL FUNDS (CDBG)
If item is not listed below please add to the bottom of the list ('misc' or 'other' is not acceptable).					
Office Supplies	Notebooks, pens, paper, etc.	375.00	375.00	-	-
Postage		-	-	-	-
Printing	Instructions on next steps, visual graphics of application process	375.00	375.00	-	-
Telephone	Tablet and Hotspot usage	150.00	150.00	-	-
Advertising	Promotional Content; social media posts, PDFs, paper fliers	150.00	150.00	-	-
Purchased Services		-	-	-	-
Training	SNAP application/program training	1,000.00	1,000.00	-	-
		-	-	-	-
		-	-	-	-
		-	-	-	-
TOTAL		2,050.00	2,050.00	-	-

Building Expenses 0

ITEM NAME	DESCRIPTION	TOTAL FUNDS	LOCAL FUNDS	STATE FUNDS	FEDERAL FUNDS (CDBG)
If item is not listed below please add to the bottom of the list ('misc' or 'other' is not acceptable).					
Space- Lease/Rent	SQ FT=	-	-	-	-
Utilities		-	-	-	-
Depreciation		-	-	-	-
Maintenance		-	-	-	-
		-	-	-	-
		-	-	-	-
TOTAL		-	-	-	-

Equipment 0

ITEM NAME	DESCRIPTION	TOTAL FUNDS	LOCAL FUNDS	STATE FUNDS	FEDERAL FUNDS (CDBG)
If item is not listed below please add to the bottom of the list ('misc' or 'other' is not acceptable).					
Equipment-Rental/Lease		-	-	-	-
Equipment-Maintenance		-	-	-	-
Computer & Software - Purchase		-	-	-	-
Computer & Software - License		-	-	-	-
		-	-	-	-
		-	-	-	-
		-	-	-	-
TOTAL		-	-	-	-

Travel 0

ITEM NAME	DESCRIPTION	TOTAL FUNDS	LOCAL FUNDS	STATE FUNDS	FEDERAL FUNDS (CDBG)
Mileage Rate Per Mile = .67					
75	Staff travel for App Assist.	50.25	50.25	-	-
		-	-	-	-
		-	-	-	-
TOTAL		50.25	50.25	-	-

Other Costs 0

ITEM NAME	DESCRIPTION	TOTAL FUNDS	LOCAL FUNDS	STATE FUNDS	FEDERAL FUNDS (CDBG)
If item is not listed below please add to the bottom of the list ('misc' or 'other' is not acceptable).					
Audit Costs		-	-	-	-
		-	-	-	-
		-	-	-	-
		-	-	-	-
		-	-	-	-
TOTAL		-	-	-	-

Indirect Costs 0

ITEM NAME	DESCRIPTION	TOTAL FUNDS	LOCAL FUNDS	STATE FUNDS	FEDERAL FUNDS (CDBG)
Indirect Cost Rate	10.0%	3,671.43	3,671.43	-	-
TOTAL		3,671.43	3,671.43	-	-

SNAP Outreach Partner Annual Budget

SNAP Outreach Activity Budget
 FFY 2024: October 1, 2024 – September 30, 2025

Agency Name and Address:

City of Somerville, MA

*Required

Department of Health and Human Services - Community Health Workers Division

*Required

50 Evergreen Ave, Somerville, MA 02145

*Required

Outreach Activity

- SNAP Information Dissemination
- Information on how to get SNAP benefits
- Training or Train-the-trainer for SNAP Outreach workers
- Disseminate information in other locations
- SNAP Gap Data
- Development of SNAP Outreach Materials (Creation of SNAP materials)
- Development of SNAP Outreach Material (Translation of outreach materials)

This budget should only represent up to 25% of your overall budget amount

Budget Summary Table (Outreach Activity)				
Entries made in detail tables will automatically update this table				
BUDGET CATEGORY	TOTAL FUNDS	LOCAL FUNDS	STATE FUNDS	FEDERAL FUNDS (CDBG)
FTE's	0.17			
Salaries	10,411.13	10,411.13	-	-
Fringe Benefits	693.98	693.98	-	-
Operating Costs	350.00	350.00	-	-
Building Expenses	-	-	-	-
Equipment	-	-	-	-
Travel	16.75	16.75	-	-
Other Costs	-	-	-	-
Indirect Costs	1,147.18	1,147.18	-	-
TOTAL	12,619.04	12,619.04	-	-

SOURCE OF OUTREACH FUNDING*					
<i>Please list anticipated funding sources</i>					
FUNDING SOURCE	COMMENT	TOTAL FUNDS	LOCAL FUNDS	STATE FUNDS	FEDERAL FUNDS (CDBG)
City of Somerville, MA	HHS CHW Division Funds	12,619.04	12,619.04	-	-
		-	-	-	-
		-	-	-	-
		-	-	-	-
TOTAL		12,619.04	12,619.04	-	-

Schedule of Personnel Expenses (Salary) 0						
TITLE OF POSITION	LOCATION	% OF FTE	TOTAL FUNDS	LOCAL FUNDS	STATE FUNDS	FEDERAL FUNDS (CDBG)
Community Health Worker Manager	Somerville	2.00%	1,623.65	1,623.65	-	-
Community Health Worker	Somerville	5.00%	2,929.16	2,929.16	-	-
Community Health Worker	Somerville	5.00%	2,929.16	2,929.16	-	-
Community Health Worker	Somerville	5.00%	2,929.16	2,929.16	-	-
		0.00%	-	-	-	-
		0.00%	-	-	-	-
TOTAL		17%	10,411.13	10,411.13	-	-

Personal Benefits (Fringe) 0

TITLE OF POSITION	LOCATION	% OF FTE	TOTAL FUNDS	LOCAL FUNDS	STATE FUNDS	FEDERAL FUNDS (CDBG)
Community Health Worker Manager	Somerville	7.00%	108.14	108.14	-	-
Community Health Worker	Somerville	10.00%	292.92	292.92	-	-
Community Health Worker	Somerville	10.00%	292.92	292.92	-	-
			-	-	-	-
		0.00%	-	-	-	-
		0.00%	-	-	-	-
TOTAL		27%	693.98	693.98	-	-

Operating Costs 0

ITEM NAME	DESCRIPTION	TOTAL FUNDS	LOCAL FUNDS	STATE FUNDS	FEDERAL FUNDS (CDBG)
If item is not listed below please add to the bottom of the list ('misc' or 'other' is not acceptable).					
Office Supplies	Notebooks, pens, paper, etc.	125.00	125.00	-	-
Postage		-	-	-	-
Printing	Instructions on next steps, visual graphics of application process	125.00	125.00	-	-
Telephone	Tablet and Hotspot usage	50.00	50.00	-	-
Advertising	Promotional Content; social media posts, PDFs, paper fliers	50.00	50.00	-	-
Purchased Services		-	-	-	-
Training		-	-	-	-
		-	-	-	-
		-	-	-	-
TOTAL		350.00	350.00	-	-

Building Expenses 0

ITEM NAME	DESCRIPTION	TOTAL FUNDS	LOCAL FUNDS	STATE FUNDS	FEDERAL FUNDS (CDBG)
If item is not listed below please add to the bottom of the list ('misc' or 'other' is not acceptable).					
Space- Lease/Rent	SQ FT=	-	-	-	-
Utilities		-	-	-	-
Depreciation		-	-	-	-
Maintenance		-	-	-	-
		-	-	-	-
TOTAL		-	-	-	-

Equipment 0

ITEM NAME	DESCRIPTION	TOTAL FUNDS	LOCAL FUNDS	STATE FUNDS	FEDERAL FUNDS (CDBG)
If item is not listed below please add to the bottom of the list ('misc' or 'other' is not acceptable).					
Equipment-Rental/Lease		-	-	-	-
Equipment-Maintenance		-	-	-	-
Computer & Software - Purchase		-	-	-	-
Computer & Software - License		-	-	-	-
		-	-	-	-
		-	-	-	-
		-	-	-	-
TOTAL		-	-	-	-

Travel 0

ITEM NAME	DESCRIPTION	TOTAL FUNDS	LOCAL FUNDS	STATE FUNDS	FEDERAL FUNDS (CDBG)
If item is not listed below please add to the bottom of the list ('misc' or 'other' is not acceptable).					
Mileage Rate Per Mile = .67					
25	Staff travel for outreach	16.75	16.75	-	-
		-	-	-	-
		-	-	-	-
		-	-	-	-
TOTAL		16.75	16.75	-	-

Other Costs 0

ITEM NAME	DESCRIPTION	TOTAL FUNDS	LOCAL FUNDS	STATE FUNDS	FEDERAL FUNDS (CDBG)
If item is not listed below please add to the bottom of the list ('misc' or 'other' is not acceptable).					
Audit Costs		-	-	-	-
		-	-	-	-
		-	-	-	-
		-	-	-	-
		-	-	-	-
TOTAL		-	-	-	-

Indirect Costs 0

ITEM NAME	DESCRIPTION	TOTAL FUNDS	LOCAL FUNDS	STATE FUNDS	FEDERAL FUNDS (CDBG)
Indirect Cost Rate	10.0%	1,147.18	1,147.18	-	-
TOTAL		1,147.18	1,147.18	-	-

Title	Name	Annual Salary	6 month salary
Community Health Worker Manager	Andria Benvenuto	\$81,182.40	\$40,591.20
Community Health Worker	Han Hogan-Rigg	\$58,583.20	\$29,291.60
Community Health Worker	Emmanuel L. Charles	\$58,583.20	\$29,291.60
Community Health Worker	Cynthia Bonilla	\$58,583.20	\$29,291.60
			\$0.00
			\$0.00
			\$0.00

Please note: Highlighted columns should autopopulate based on information entered in the otf

Total Hours Worked Per Week	Hourly Rate	Total % of SNAP Time (AA and OA)	Application Assistance (AA)		Outreach Ac
			% of AA	AA	% of OA
40	\$39.03	10	8%	\$ 6,088.68	2%
40	\$28.17	20	15%	\$ 8,787.48	5%
40	\$28.17	20	15%	\$ 8,787.48	5%
40	\$28.17	20	15%	\$ 8,787.48	5%
	#DIV/0!	0	0%	\$ -	0%
	#DIV/0!	0	0%	\$ -	0%
	#DIV/0!	0	0%	\$ -	0%
				\$32,451.12	17%

er cells

Activities (OA)	Fringe		
OA	Fringe Rate	Fringe AA (%)	Fringe OA (%)
\$ 1,623.65	7%	\$405.51	\$108.14
\$ 2,929.16	10%	\$878.75	\$292.92
\$ 2,929.16	0%	\$0.00	\$0.00
\$ 2,929.16	10%	\$878.75	\$292.92
\$ -	0%	\$0.00	\$0.00
\$ -	0%	\$0.00	\$0.00
\$ -	0%	\$0.00	\$0.00
\$10,411.13		\$2,163.01	\$693.98

SNAP Outreach Partner Annual Budget
 FFY 2024: April 1, 2024 – September 30, 2024

Agency Name and Address:
 ABC Corporation
 1 Smith Street
 Exampleville, MA 01234

*Required
 *Required
 *Required

Instructions below are for both budget tabs:
 Allowable administrative costs are operational costs for outreach, including all administrative expenses that are reasonable and necessary to operate approved outreach activities. All information listed on the project budget should only be reflective of the time and resources for SNAP outreach application assistance activities. Back up documentation for all items listed must be retained for 7 years and may be requested for review at any time.

Budget Summary Table				
Entries made in detail tables will automatically update this table				
BUDGET CATEGORY	TOTAL FUNDS	LOCAL FUNDS	STATE FUNDS	FEDERAL FUNDS
FTE's	0.55			
Salaries	16,111.00	13,611.00	2,500.00	-
Fringe Benefits	5,861.07	-	5,861.07	-
Operating Costs	650.00	650.00	-	-
Building Expenses	847.00	847.00	-	-
Equipment	350.00	350.00	-	-
Travel	54.00	54.00	-	-
Other Costs	-	-	-	-
Indirect Costs	2,207.00	2,207.00	-	-
TOTAL	26,080.07	17,719.00	8,361.07	-

Costs must be entered based on available funding in the appropriate columns based on that funding source. For items that are not listed, please add and provide an explanation.

Important: Do not enter information directly into these sections on any of the tabs; they will auto-populate based on entries in the sections below and calculate based on all tabs.

All of the funding source columns should equal the total funds column.

Calculation for Outreach budget (maximum at 25%):
 1. Overall budget available 34,909.76, 25, divide this by 4 = \$8,726.69
 OR
 2. Divide Application Activity Budget by 3. \$26,180.07/3 = \$8,726.69
 A budget of up to the 25% can be created for Outreach activities.

SOURCE OF FUNDING					
Please list anticipated funding sources					
FUNDING SOURCE	COMMENT	TOTAL FUNDS	LOCAL FUNDS	STATE FUNDS	FEDERAL FUNDS (CDBG)
State Funding		17,719.00	17,719.00		
United Way Funds		8,361.07		8,361.07	
		-			
		-			
TOTAL		26,080.07	17,719.00	8,361.07	-

Enter all of the funding sources for the SNAP project funds in these sections. Potential funding sources: Any non-federal funding including State or local government funding, Private contributions (foundations or corporate grants, individual donations), Social enterprise revenue, and community development block grants (federal, but accepted)

The total from all of the funding sources for the outreach and application assistance tabs should equal the total budget.

Schedule of Personnel Expenses (Salary)						
TITLE OF POSITION	LOCATION	% OF FTE	TOTAL SALARY	LOCAL FUNDS	STATE FUNDS	FEDERAL FUNDS (CDBG)
Director	Worcester	10%	5,000.00	2,500.00	2,500.00	
SNAP Coordinator	Worcester	45%	11,111.00	11,111.00		
			-			
			-			
TOTAL		55%	16,111.00	13,611.00	2,500.00	-

Enter the percentage of FTE and salary for each employee spending time on SNAP outreach application/recert assistance activities for both sections (75% Application assistance/25% Outreach).

Enter the monies under the funding sources for each line item accordingly. If you have foundation money, allowable state monies and CDBG, then if must be broken down accordingly.

Personal Benefits (Fringe)						
TITLE OF POSITION	LOCATION	% OF FTE	TOTAL BENEFITS	LOCAL FUNDS	STATE FUNDS	FEDERAL FUNDS (CDBG)
Director	Worcester	10%	1,850.00		1,750.00	
SNAP Coordinator	Worcester	45%	4,111.07		4,111.07	
			-			
			-			
TOTAL		55%	5,961.07	-	5,861.07	-

Enter the fringe total (if applicable) for the percentage of fringe benefits included for the employee spending time on SNAP outreach/application assistance activities accordingly.

Operating Costs					
ITEM NAME	COMMENT	TOTAL FUNDS	LOCAL FUNDS	STATE FUNDS	FEDERAL FUNDS (CDBG)
If item is not listed below please add to the bottom of the list.					
Office Supplies		100.00	100.00		
Postage		200.00	200.00		
Printing		100.00	100.00		
Telephone		50.00	50.00		
Advertising		-	-		
Purchased Services		100.00	100.00		
Training		100.00	100.00		
		-	-		
		-	-		
TOTAL		650.00	650.00	-	-

This budget item consists of costs associated with operating, and maintaining the facility such as: office supplies (general supplies), postage (SNAP outreach mailings), printing (client documentation and informational SNAP materials for clients), telephone (mobile and telephone lines), Advertising (development and production of outreach materials when no other appropriate materials exist. Outreach materials can include contact cards also known as business cards. To be allowable, the term "SNAP" or applicable State program name must be included on the contact card), and training (staff).

*Production and distribution of public service announcements to radio, television, print or electric media are NOT REIMBURSEABLE ITEMS.

Building Expenses

ITEM NAME	COMMENT	TOTAL FUNDS	LOCAL FUNDS	STATE FUNDS	FEDERAL FUNDS (CDBG)
Space- Lease/Rent	SQ FT= 46	547.00	547.00		
Utilities		100.00	100.00		
Depreciation		100.00	100.00		
Maintenance		100.00	100.00		
		-			
		-			
TOTAL		847.00	847.00		

This budget line item includes: utilities (heat and electricity), building depreciation, and building maintenance (cleaning and security). Please provide a breakdown of space square footage calculations. Example: Project Budget Narrative for a Project Involving One Privately Rented Building:
 Here is an example assuming that 6 of the 10 staff in a rented building are involved with SNAP outreach. The 6 staff average 21% of their time on SNAP outreach. Note that staff salaries are not used in the calculation.
 • Total square feet occupied = 5,000 sq ft
 • Total staff = 10; SNAP Outreach staff = 6; $6 \div 10 = .6$
 • $5,000 \text{ sq ft} \times .6 \text{ staff} = 3,000 \text{ sq ft}$
 If staff average only 21% of their time on SNAP Outreach, then $3,000 \text{ sq ft} \times .21 = 630 \text{ sq ft}$ that can be charged to the SNAP Outreach program. $630 \div 5,000 = .126$
 If rent is \$100,000 per year then $\$100,000 \times .126 = \$12,600$ that can be budgeted for SNAP Outreach building space.

Be sure to include the square footage of the percentage of space utilized for SNAP outreach/application assistance activities if this is being included

Equipment

ITEM NAME	COMMENT	TOTAL FUNDS	LOCAL FUNDS	STATE FUNDS	FEDERAL FUNDS (CDBG)
Equipment-Rental/Lease		200.00	200.00		
Equipment-Maintenance		-			
Computer & Software - Purchase		100.00	100.00		
Computer & Software - License		50.00	50.00		
		-			
		-			
		-			
TOTAL		350.00	350.00		

This budget items consists of equipment lease and maintenance (copiers) and computer and/or software (purchase and/or license). if the purchase of equipment is not going to be used solely for this project then the cost will need to be proportioned accordingly.

Travel

ITEM NAME	COMMENT	TOTAL FUNDS	LOCAL FUNDS	STATE FUNDS	FEDERAL FUNDS (CDBG)
Please provide internal travel policies/procedures.					
Mileage Rate Per Mile = 0.54					
100 miles		54.00	54.00		
		-			
		-			
		-			
TOTAL		54.00	54.00		

This budget item includes of mileage costs for staff travel for outreach in the service area and for SNAP Meetings, site visits, etc. Charges for travel for the purpose of fulfilling the approved outreach plan objectives based on official state, local, or university travel regulations.
Be sure to send UMMS your organizations travel policy if travel is included on your budget.

Other Costs

ITEM NAME	COMMENT	TOTAL FUNDS	LOCAL FUNDS	STATE FUNDS	FEDERAL FUNDS (CDBG)
Please title and explain any costs listed in this category. Misc or Other is not acceptable.					
Audit Costs		-			
Insurance Costs		-			
		-			
		-			
		-			
TOTAL		-	-		

This budget item includes audit costs and/or insurance costs (if applicable) as they relate to SNAP Outreach. Any other costs listed, please provide and explanation.

Indirect Costs

ITEM NAME	COMMENT	TOTAL FUNDS	LOCAL FUNDS	STATE FUNDS	FEDERAL FUNDS (CDBG)
Indirect Costs	Rate= 10%	2,207.00	2,207.00		
TOTAL		2,207.00	2,207.00		

This budget item includes indirect costs. Indirect costs are costs incurred by a state agency or an outreach partner in support of allowable activities that are directly charged to sponsoring federal or state agencies.

Please provide a federally approved indirect cost letter if the