

M04 Standard Contract and M04/M78 Engagement Contract Budget Form

Fiscal Year: 2026	Vendor Name:	CITY OF SOMERVILLE	NEW ONLY
	Contract ID:	INTF2354M78220129158	
	Budget #	1	

BRIEF ENGAGEMENT SUMMARY - Enter Below					
UFR# Program Component -UFR# Codes Below on tab	FTE	New Amount	Offset Amount	*Offset Funding Source	New Budget Reimbursement Total
101 Program Manager					\$0.00
					\$0.00
					\$0.00
					\$0.00
					\$0.00
					\$0.00
					\$0.00
					\$0.00
					\$0.00
					\$0.00
					\$0.00
					\$0.00
					\$0.00
150 Payroll Taxes					\$0.00
151 Fringe Benefits					\$0.00
Total Program Staff		\$0.00	\$0.00	\$0.00	\$0.00
301 Program Facilities					\$0.00
390 Facilities Operations					\$0.00
Total Occupancy		\$0.00	\$0.00	\$0.00	\$0.00
201 Consultant					\$0.00
202 Temporary Help					\$0.00
203 Prov. Reimb/Stipends		\$15,000.00			\$15,000.00
204 Staff Training					\$0.00
205 Staff mileage/travel					\$0.00
206 Subcontract		\$87,194.48			\$87,194.48
207 Meals					\$0.00
208A Vehicle					\$0.00
208B Vehicle Expenses					\$0.00
208C Vehicle Depreciation					\$0.00
211 Client Personal Allowances					\$0.00
212 Provision of Material Goods					\$0.00
213 Data Processing					\$0.00
214 Commercial Income Resources					\$0.00
215 Program Supplies		\$1,805.52			\$1,885.52
Total Non Personal Exp.		\$104,000.00	\$0.00	\$0.00	\$104,000.00
216 Program Support		\$8,500.00			\$8,500.00
Total Direct Administrative Exp.		\$8,500.00	\$0.00		\$8,500.00
SUBTOTAL PROGRAM COSTS		\$112,500.00	\$0.00		\$112,500.00
410 Agency Admin. Support Allocation		\$12,500.00			\$12,500.00
PROGRAM TOTAL		\$125,000.00	\$0.00		\$125,000.00

\*If multiple funding sources, please indicate "various" on the column and provide backup listing all funding sources.  
If any funds allocated to UFR# 206 Subcontract, a Subcontractor Identification List must be completed and submit to DPH by the provider/vendor