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| LEA:  Agency Code:  Program Contact: | FOR TITLE:  Project # |

| *Budget Code/ Category* | ***EXPLANATION OF EXPENDITURES IN THIS CATEGORY***  ***(as it relates to the program narrative for this title)*** |
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| ***Code 15***  *Professional Salaries* |  |
| ***Code 16***  *Support Staff Salaries* |  |
| ***Code 40***  *Purchased Services* |  |
| ***Code 45***  *Supplies and Materials* |  |
| ***Code 46***  *Travel Expenses* |  |
| ***Code 80***  *Employee Benefits* |  |
| ***Code 90***  *Indirect Cost* |  |
| ***Code 49***  *BOCES Services* |  |
| ***Code 30***  *Minor Remodeling* |  |
| ***Code 20***  *Equipment* |  |