

**ARKANSAS DEPARTMENT OF WORKFORCE SERVICES  
SUBGRANT AGREEMENT  
ATTACHMENT A - BUDGET**

Attachment A

SUBGRANT RECIPIENT \_\_\_\_\_ SUBGRANT NUMBER \_\_\_\_\_  
PROGRAM YEAR \_\_\_\_\_ MODIFICATION NUMBER 0

			<b>TOTAL</b>
Salaries	\$ -		\$ -
Fringe Benefits	\$0.00		\$0.00
Travel	\$0.00		\$0.00
Supplies	\$0.00		\$0.00
Indirect Costs	\$0.00		\$0.00
Administrative Expenditures	\$0.00		\$0.00
Other Expenditures	\$0.00		\$0.00
<b>TOTAL FUNDING</b>	<b>\$0</b>		<b>\$0</b>