

Submitted By: _	Date:	Date:					
Signature							

Budget Detail Worksheet

	Subgrantee Name:									
Award #:		Grant Year:								
	Award Amount:	Report #								
					Estimate Total	Approved Cost	Recipient			
Type/			Estimate		Cost (Unit Cost	(OKOHS Use	(Name/			
Category	y AEL#	Item	Unit Cost	Qty	x Qty)	Only)	Location)	Intended Use	Discipline	
									 	
Notes:	 Please use a separat 	e BDW for each open grant								
		given open grant should be Report #1. Subsequent re			-				chment.	
	• • • • • • • • • • • • • • • • • • • •	g "T" , Equipment "E" or Exercises "X" / Category refe				Interoperable Comm	unication Equi	pment "ICE", etc.		
	· ·	e Service "FS", Law Enforcement "LE" or Emergency	•							
		nd on the FEMA.gov website located at: https://www.f					-			
		Equipment purchase must meet Minimum State Stan		blished	by OKOHS pursuar	nt to Title 74 Section	51.1a of the C	klahoma Statutes		
Statew	ide Interoperable Co	ommunications Planning Coordinator A	pproval:							
OKOHS USE ONLY				Reviewed By:			Estimated (Estimated Grant		
							Expenditure	es		
				Appro	oved By:		This Repor	t:		