

MISCELLANEOUS ITEM DETAIL

CITY OF PHILADELPHIA, DEPARTMENT OF PUBLIC HEALTH 500 S. BROAD ST., PHILADELPHIA, PA 19146	CUMULATIVE REPORTING PERIOD FROM: 2/01/97 TO: _____
AGENCY CORPORATE NAME: ABC Agency	CONTRACT NUMI _____
CONTRACT NAME: MCH Education	

BUDGET CATEGORY	DESCRIPTION	NUMBER	UNIT COST	TOTAL AMOUNT
121	Client Oriented Service Salaries			\$3,720
122	Client Oriented Service Benefits			
	FICA @ 7.650% x 3720	285		
	W/C @ 1% x 3720	37		
	Pension \$50 per month x 2.22 staff	61		
	Health \$145 per month x 2.22 staff	322		
	Disability Ins. .56% x 3720	21		
	Unemploy Ins. 4% x 3720	14		\$740
311	Rent			\$393
313	Insurance Gen'l Liability			\$220
321	Telephone			\$66
331	Office Supplies			\$45
344	Rehabilitation Supplies			\$26
351	Staff Travel			\$70
383	Other Operating Expenses	528		
	10% Indirect Cost for Administration	_0		\$528
	Total All			\$5,808

