

OMB No.: 0915-0285. Expiration Date: 1/30/2020

				OIVIB NO	J913-0263. EX	piration Date: 1/30/2020	
DEPARTMENT OF HEALTH AND HUMAN SERVICES Health Resources and Services Administration SF-424A: BUDGET INFORMATION				FOR HRSA USE ONLY			
				Grant Number		Application Tracking Number	
Budget Information							
Section A – Budget Summ	ary						
Grant Program Function o	or CFDA	Uno	Estimated Unobligated Funds		New or Revised Budget		
Activity	Number	Federal	Non- Federal	Federal	Nor Fede	Lorenzo	
Community Health Centers	93.224	N/A	N/A				
Health Care for the Homeles	s 93.224	N/A	N/A				
Migrant Health Centers	93.224	N/A	N/A				
Public Housing	93.224	N/A	N/A				
	Total [auto-calcula	ated in EHB]				
Section C – Non-Federal R	esources						
Grant Program Function or Activity	Applicant	State	Local	Other	Progra Incom		
Community Health Centers							
Health Care for the Homeless							
Migrant Health Centers							
Public Housing							
Total [auto-calculated in EHB]							

Public Burden Statement: An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control number for this project is 0915-0285. Public reporting burden for this collection of information is estimated to average 1 hour per response, including the time for reviewing instructions, searching existing data sources, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to HRSA Reports Clearance Officer, 5600 Fishers Lane, Room 10-33, Rockville, Maryland, 20857.