



OMB No.: 4040-0006. Expiration Date: 2/28/2025

<p style="text-align: center;">DEPARTMENT OF HEALTH AND HUMAN SERVICES Health Resources and Services Administration</p> <p style="text-align: center;">SF-424A: BUDGET INFORMATION</p>				FOR HRSA USE ONLY		
				Grant Number		Application Tracking Number
Budget Information						
Section A – Budget Summary						
Grant Program Function or Activity	CFDA Number	Estimated Unobligated Funds		New or Revised Budget		
		Federal	Non-Federal	Federal	Non-Federal	Total [will auto-calculate in EHBs]
Bridge Funding	93.527	N/A	N/A			



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Section B – Budget Categories			
Object Class Categories	Federal	Non-Federal	Total [will auto-calculate in EHBs]
Personnel			
Fringe Benefits			
Travel			
Equipment			
Supplies			
Contractual			
Construction			
Other			
Total Direct Charges [will auto-calculate in EHBs]			
Indirect Charges			
Total [will auto-calculate in EHBs]			



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Section C – Non-Federal Resources						
Grant Program Function or Activity	Applicant	State	Local	Other	Program Income	Total [will auto-calculate in EHBs]
Bridge Funding						
Section D – Forecasted Cash Needs (optional)						
	1 st Quarter	2 nd Quarter	3 rd Quarter	4 th Quarter	Total 1 st Year [will auto-calculate in EHBs]	
Federal						
Non-Federal						
Total [will auto-calculate in EHBs]						



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Section E – Budget Estimates of Federal Funds Needed for Balance of Project				
Grant Program	Future Funding Periods (Years)			
	First	Second	Third	Fourth
N/A	N/A	N/A	N/A	N/A
Total	N/A	N/A	N/A	N/A
Section F – Other Budget Information				
Direct Charges				
Indirect Charges				
Remarks				

Public Burden Statement: Health centers (section 330 grant funded and Federally Qualified Health Center look-alikes) deliver comprehensive, high quality, cost-effective primary health care to patients regardless of their ability to pay. The Health Center Program application forms provide essential information to HRSA staff and objective review committee panels for application evaluation; funding recommendation and approval; designation; and monitoring. The OMB control number for this information collection is 0915-0285 and it is valid until 3/31/2023. This information collection is mandatory under the Health Center Program authorized by section 330 of the Public Health Service (PHS) Act ([42 U.S.C. 254b](#)). 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 14N136B, Rockville, Maryland, 20857 or paperwork@hrsa.gov.