**City of Austin Health and Human Services Department**

**Program Budget NARRATIVE (City funds only)**

Social Service Contracts – City of Austin

|  |  |
| --- | --- |
| **PERSONNEL** |  **NARRATIVE/ Descriptions** |
| **1. Salaries and Benefits** |  |
| **OPERATING EXPENSES**  |
| **1. General Operating Expenses** |   |
| **2. Out of County Travel (itemized)** |  |
| **3. Other *(specify)*** |  |
| **DIRECT ASSISTANCE**  |
| **1.** **Food/ Beverage for Clients** |   |
| **2.** 2. **Financial Assistance for Clients** ***(specify)*** |  |
| **3. Other** **(*specify*)** |   |
| **CAPITAL OUTLAY**  |
| **1. Capital Outlay (itemized)** |   |