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

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

Social Service Contracts – City of Austin

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| **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)** |  |