**Josiah Charles Trent Memorial Foundation Endowment Fund**

**Budget Form**

 Project Title:

 Principal Investigator:

|  |
| --- |
|  **Other** **Funding Trent** **Item Cost Source Request**  |
| 1. **Salaries and Wages**
 |
| * Name, position/nature of support
 | $ | $ | $ |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |
| 1. **Student Support**
 |  |  |  |
| * Grad or undergrad?/nature of support
 | $ | $ | $ |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |
| 1. **Conference Expenses**
 |
| * May include venue, food, A/V equip., etc.
 | $ | $ | $ |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |
| 1. **Consultant/Contract Services and Honoraria**
 |
| * Identify and list budget detail
 | $ | $ | $ |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |
| 1. **Travel**
 |
| * Airfare
 | $ | $ | $ |
| * Other transportation
 |  |  |  |
| * Hotel
 |  |  |  |
| * Meals/per diem
 |  |  |  |
|  |
| 1. **Supplies/Materials**
 |
|  | $ | $ | $ |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |
| 1. **Other Expenses**
 |
|  | $ | $ | $ |
|  |  |  |  |
|  |  |  |  |
| **TOTALS** | **$** | **$** | **$** |

\*\* Delete or insert additional budget lines as needed

\*\* A separate budget narrative may be attached, if relevant

\*\* Please contact alexandra.de.havilland@duke.edu with any questions