|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **ESTIMATED BUDGET – GRANT AGREEMENT** | | | | | | |
|  |
| Action: | | *<specify>* | | | | |  |
| Place: | | *<specify>* | | | | |  |
| Implementation period: | | *<specify>* | | | | |  |
| CoE Administrator responsible: | | *<specify>* | | | | |  |
| Currency: | | *<specify>* | | | | |  |
| Grant by the Council of Europe: | | *<specify the total amount of the CoE Grant >* | | | | |  |
| Contribution by the Grantee: | | *<¹specify>* | | | | |  |
| **Expenditure** | | **Unit** | **# of units** | **Average unit rate** | **# of participants** | **Estimated** |  |
| **budget** |  |
| **1. Human Resources** | | | | | | |  |
| **1.1. Staff** | | | | | | |  |
| 1.1.1 specify | | Per xx |  | 0,00 |  | 0,00 |  |
| 1.1.2 specify | | Per xx |  | 0,00 |  | 0,00 |  |
| 1.1.3 specify | | Per xx |  | 0,00 |  | 0,00 |  |
| **1.2. Experts/Consultants** | | | | | | |  |
| 1.2.1 specify | | Per xx |  | 0,00 |  | 0,00 |  |
| 1.2.2 specify | | Per xx |  | 0,00 |  | 0,00 |  |
| 1.2.3 specify | | Per xx |  | 0,00 |  | 0,00 |  |
| **1.3. Per diems (lunch, dinner, accommodation, transfer)** | | | | | | |  |
| 1.2.1 International | | Per diem |  | 0,00 |  | 0,00 |  |
| 1.2.2 Local | | Per diem |  | 0,00 |  | 0,00 |  |
| ***Subtotal 1 Human Resources*** | | | | | | **0,00** |  |
| **2. Travel** | | | | | | |  |
| 2.1 International travel | | Per return flight |  | 0,00 |  | 0,00 |  |
| 2.2 Local transportation | | Per trip |  | 0,00 |  | 0,00 |  |
| ***Subtotal 2 Travel*** | | | | | | **0,00** |  |
| **3. Equipment and supplies** | | | | | | |  |
| 3.1 specify | | Per xx |  | 0,00 |  | 0,00 |  |
| 3.2 specify | | Per xx |  | 0,00 |  | 0,00 |  |
| ***Subtotal 3 Equipment and supplies*** | | | | | | **0,00** |  |
| **4. Office items** | | | | | | |  |
| 4.1 Office rent and related charges | | Per month |  | 0,00 |  | 0,00 |  |
| 4.2 Office supplies | | Per month |  | 0,00 |  | 0,00 |  |
| 4.3 Office furniture and equipment | | Per item |  | 0,00 |  | 0,00 |  |
| 4.4 Other services | | Per month |  | 0,00 |  | 0,00 |  |
| ***Subtotal 4 Office items*** | | | | | | **0,00** |  |
| **5. Other expenditure and services** | | | | | | |  |
| 5.1 Publications | | Per item |  | 0,00 |  | 0,00 |  |
| 5.2 Studies, research | | Per item |  | 0,00 |  | 0,00 |  |
| 5.3 Translation | | Per 250 words |  | 0,00 |  | 0,00 |  |
| 5.4 Interpretation | | Per person/day |  | 0,00 |  | 0,00 |  |
| **5.5. Conferences/seminars²** | | | | | | |  |
| 5.5.1 Rent of hall | | Per event |  | 0,00 |  | 0,00 |  |
| 5.5.2 Rent of interpretation equipment | | Per event |  | 0,00 |  | 0,00 |  |
| 5.5.3 Coffee breaks | | Per event |  | 0,00 |  | 0,00 |  |
| 5.5.4 Local transportation | | Per event |  | 0,00 |  | 0,00 |  |
| 5.5.5 Per diems for participants (lunch, dinner, accommodation, transfer) | | Per event |  | 0,00 |  | 0,00 |  |
| 5.5.6 Visibility actions | | Per item |  | 0,00 |  | 0,00 |  |
| ***Subtotal 5 Other expenditure and services*** | | | | | | **0,00** |  |
| **6. Other** | | | | | | |  |
| 6.1 specify | | Per xx |  | 0,00 |  | 0,00 |  |
| 6.2 specify | | Per xx |  | 0,00 |  | 0,00 |  |
| ***Subtotal 6 Other*** | | | | | | **0,00** |  |
| **Total Grant expenditure (1-6)** | | | | | | **0,00** |  |
| Notes: | | | | | | |  |
| ¹Indicate whether the grantee commits to contribute by means of an in-kind contribution, or by means of a financial contribution. In the first case, the in-kind contribution shall be described, while in the second case, the amount and the currency of the financial contribution shall be indicated in the box. | | | | | | |  |
| ²Insert different lines to take into account differences of unit rates or number of participants in each event (lunch, journeys, etc). | | | | | | |  |
| “Average unit rate” can be used but not “Average number of participants”. 2 See Articles 1.1 and 3.2. | | | | | | |  |
| I certify that this is the budget proposed | | | I accept the proposed budget | | | |  |
| **Name of the representative of the Grantee (*followed by capacity, e.g. Director*)** | *(Name and capacity)* | | **Name of the representative of the Council of Europe** | | *(Name)* | |  |
| **Signature** |  | | **Signature** | |  | |  |
| **Date:** |  | | **Date:** | |  | |  |