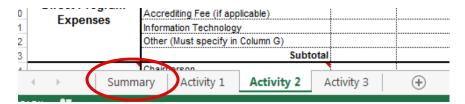
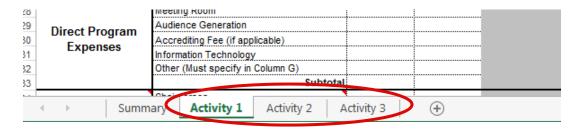
Instructions to complete Budget Form

General Information

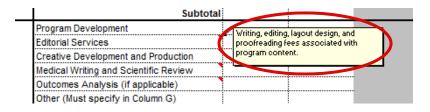
- A separate budget sheet must be completed for each activity type. Example -Live, Enduring (includes web/online and print). Note: Multiple Offerings of same activity type (ex: Live Series Meeting) are considered one activity
- 2. Fields that are colored blue auto-calculate and do not need to be completed.
- 3. The first tab in the spreadsheet "Summary" will mostly auto populate from the data that is entered in the individual activity tabs.



4. There are 3 Activity tabs provided on the spreadsheet "Activity 1 - Activity 3". Each Activity sheet will capture data from a single activity. However, in case of multiple offerings of single activity type (ex: Live Series Meeting), data will be captured on one Activity sheet.



5. Additional information is provided in the cells with the red triangles in the upper right hand corner



Instructions to complete Summary Sheet

The summary sheet is mostly populated by the data entered in the activity sheet(s). Fields that need to be entered by the requestor are marked below

1. Rows 7 and 10 are mandatory fields and must be completed by requestor

7	Program Name:										
8		Attendees	Speakers	Staff	Other	Total Participants					
9	Estimated Totals	0	0	0	0	0					
10	Total amount requested from BMS (Must be completed)										
11	Total projected income \$0.00										
12	Fetimated cost of program \$0.00										

2. Row 9 will automatically calculate based on the data entered on the activity sheet(s)

8		Attendees	Speakers	Staff	Other	Total Participants		
9	Estimated Totals	0	0	0	0	0		
10	Total amount requested from BMS (Must be completed)							

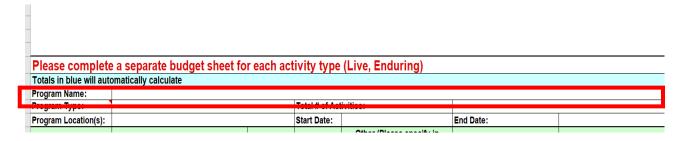
3. Rows 11-31 will automatically calculate based on the data entered on the activity sheet(s)

10	Total amount requested from BMS (Must be completed)							
11	Total projected income \$0.00							
12	Estimated cost of program \$0.00							
13	Total amount of progra	Total amount of program \$0.00						
14			·					
15	Catego	ry	Total Est. Cost	%				
16	Managemen	t Fees	\$0.00	Calc				
17	Content Deve	lopment	\$0.00	Calc				
18	Direct Program	Expenses	\$0.00	Calc				
19	Honora	ria	\$0.00	Calc				
20	Meals/Travel E	xpenses	\$0.00	Calc				
21	Incom	е	\$0.00	Calc				
22								
23 24	METRICS (Cost Pe	r Attendee)						
25	Category	Estimated						
26	Management Fees	Calc						
27	Content Development	Calc						
28	Direct Program Expenses	Calc						
29	Honoraria	Calc						
30	Travel/Meals Expenses	Calc						
31	Total	\$0.00						

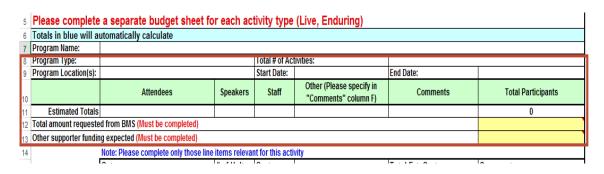
Instructions to complete Activity Sheet

The activity sheets will capture the data from a single activity. Multiple Offerings of same activity type (ex: Live Series Meeting) will be considered one activity.

1. Rows 7 will automatically populate based off of the data entered on the summary sheet



2. Rows 8-13 are mandatory fields and must be completed



3. Enter the number of units/hours (Column C) for the items that are relevant, then enter appropriate hourly rate/unit cost (Column D). In column G, fill out the

reason for the incurred cost and any additional information you would like to include for the explanation. Any entries to the category "Other" must be specified in column G

	Note: Please complete only those line	items re	levan	t for th	is act	ity		
	• ,	# of Un or Tota Hours		Cost Unit	er		Total Est. Cost	Comments
	Logistic Management Fee	\wedge		1	\		\$0.00	
Managament Face	Program Promotion and Advertising	7	\	7	1		\$0.00	/ \
Management Fees	Other (Must specify in Column G)	1	1	7	1		\$0.00	/ \
	Subtotal						\$0.00	/
	Program Development						\$0.00	/
	Editorial Services						\$0.00	/
Content	Creative Development and Production						\$0.00	
	Medical Writing and Scientific Review						\$0.00	
Development	Outcomes Analysis (if applicable)						\$0.00	
	Other (Must specify in Column G)	Colum	n C	Colu	nn D		\$0.00	Column G
	Subtotal						\$0.00	
	Materials (Slide kits/CD-Rom, etc.)						\$0.00	
	Meeting Room						\$0.00	
Direct Program	Audience Generation						\$0.00	
Expenses	Accrediting Fee (if applicable)						\$0.00	
Lxpenses	Information Technology						\$0.00	\
	Other (Must specify in Column G)						\$0.00	
	Subtotal						\$0.00	
	Chairperson		_	1			\$0.00	/
Honoraria	Speaker/Author/Editor Honorarium		<u> </u>				\$0.00	······································
	Other Honorarium (Must specify in Column G) \		_			\$0.00	
	Subtotal		_	_ \	/		\$0.00	

- 4. Enter the number of days (Column C) for the items that are relevant, then enter appropriate cost per person (Column D) and the total number of individuals in (Column E). In column G, fill out the reason for the incurred cost and any additional information you would like to include for the explanation. Any entries to the category "Other" must be specified in column G
 - *For buffets, please be sure to break out the estimated cost by the projected number of individuals. Please note all meal costs should include the total cost of the food and/or beverage, tax and tip.

38		Number of Days	Cost per Person	Number of Individuals	Total Est. Cost	Comments
	ATTENDEE					
Tor 100 or more accertages)	Attendee Breakfast Attendee Lunch Attendee Dinner Attendee Breaks SPEAKER / FACULTY / STAFF				\$0.00	
	Speaker Travel	+	+	1	\$0.00	
45 46	Speaker Lodging				\$0.00	· · · · · · · · · · · · · · · · · · ·
47	Speaker Ground Transfers	Column C	Column D	Column E	\$0.00	Column G
48 49 Meals/Travel	Speaker Meal (example Slide Review) Staff Travel			<u> </u>	\$0.00 \$0.00	
50 Expenses	Staff Lodging	1		1	\$0.00	/
51	Staff Ground Transfers	1 1			\$0.00	\ /
52	Staff Meal		1 /		\$0.00	\
53	Other Travel (Must specify in Column G)	\ /	\ /		\$0.00	
54	Subtotal	0			\$0.00	

5. Enter the cost per person (Column D) and the total number of individuals in (Column E). In column G, fill out the reason for the incurred cost and any additional information you would like to include for the explanation.

55			Cost pe Person	r Number of Individuals	Total Est. Income	
i6	Income	Registration Fees Charged for Participation			\$0.00	
57	moomo	Subtotal			30.00	

6. Rows 61-62 will automatically calculate based on the data entered on the activity sheet

60	Estimated
© Cost of Program	\$0.00
32 Total Amount of Program*	\$0.00
63 *Cost of Program LESS Projected Income	