

CT Grown for CT Kids Grant

Budget Tracker Demo

Program Coordinator: Hannah Carty

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Before you begin...

- Open your contract and have it in front of you.
- For Full Grants:
 - Open to Appendix A, Section III.
- For Microgrants:
 - Open to “*Per your application*”



Full Grant

III. Budget: The Contractor shall adhere to the budget below. The Contractor is responsible for supplying as many staff hours as may be necessary to meet the Contract work requirements. The Contractor shall maintain and keep internal records of staff time. DOAG reserves the right to request internal time records if necessary.

Expense Category	Total Cost
Salary	\$7,750.00
Equipment	\$4,150.00
Materials & Supplies	\$5,700.00
Subcontract/Consultant	\$1,500.00
Other: Honorariums	\$750.00
Subtotal	\$19,850.00
	Total Amount: \$19,850.00

A. See Appendix B: Payment Terms for additional information.

B. Budget Justification:

1. **Salary & Fringe: \$7,750**
 - a. Employee Supplement for Educators, Gardening Coordinator, and Program Manager = \$7,750
2. **Equipment: \$4,150**
 - a. Hydroponic growing equipment and greenhouse = \$4,150

Microgrant

In order to receive a reimbursement, you must **submit receipts for expenses in accordance with the project budget and reasonably necessary to complete the project with proof of payment and the final report no later than October 30, 2025.** The final report requirements are attached to this letter and must be used in its entirety to describe your project and its outcomes.

Per your application, your awarded project budget is:

- \$1,500 for Salary & Fringe; \$500 for Equipment; \$1,800 for Materials & Supplies; and \$200 for Contractual Expenses

You anticipated reaching **300** students annually. Please be sure to track actual impact throughout the duration of your project.

To obtain reimbursement for the completed project, please attach pictures and other relevant material showing the completed work along with the narrative final report. To be reimbursed for completed work, please ensure the final report showcases the results of the work done directly associated with the award and the budget itemized above. Please be aware that incomplete work shall not be reimbursed.

Opening the Form

- Open the spreadsheet provided by the Program Coordinator.
- Ensure you are on the “Budget” tab.
- Familiarize yourself with the navigation.
- Read the instructions at the top of the page.



File Home Insert Draw Page Layout Formulas Data Review View Automate Help Acrobat

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CTG4CTK Budget Tracker

Organization Name

Grant Name CTG4CTK Match Requirement 0% Grant Year

Instructions: Please start by filling out the top page with information from Appendix A in your contract which outlines your budgeted funds. **Please only fill cells with black outlines and white backgrounds.** You may then use the tabs at the bottom of the page to navigate between the pages to summarize your budget information. If you have any questions, please reach out to your Program Coordinator.

Budget Request

	Contract Funds	Match	Total Required Grant Spend
Salary & Fringe		\$ -	\$ -
Rental of Equipment		\$ -	\$ -
Equipment		\$ -	\$ -
Materials & Supplies		\$ -	\$ -
Subcontract/Consultant		\$ -	\$ -
Other 1		\$ -	\$ -
Other 2		\$ -	\$ -
Other 3		\$ -	\$ -
Other 4		\$ -	\$ -
Other 5		\$ -	\$ -
Total:	\$ -	\$ -	\$ -

Actual Budget

	Total Funds Spent	Total Match Spent	Total Reimbursement	% Δ
Salary & Fringe	\$ -	\$ -	\$ -	#DIV/0!
Rental of Equipment	\$ -	\$ -	\$ -	#DIV/0!
Equipment	\$ -	\$ -	\$ -	#DIV/0!
Materials & Supplies	\$ -	\$ -	\$ -	#DIV/0!
Subcontract/Consultant	\$ -	\$ -	\$ -	#DIV/0!
Other 1	0	\$ -	\$ -	#DIV/0!
Other 2	0	\$ -	\$ -	#DIV/0!
Other 3	0	\$ -	\$ -	#DIV/0!
Other 4	0	\$ -	\$ -	#DIV/0!
Other 5	0	\$ -	\$ -	#DIV/0!
Total:	\$ -	\$ -	\$ -	

Budget Salary Rental Equip Materials Subcontract 1 2 3 4 5 +

Instructions: Please start by filling out the top page with information from Appendix A in your contract which outlines your budgeted funds. **Please only fill cells with black outlines and white backgrounds.** You may then use the tabs at the bottom of the page to navigate between the pages to summarize your budget information. If you have any questions, please reach out to your Program Coordinator.

Instructions

- On the first page, the only fields you should edit are:
 - Organization Name
 - Grant Year
 - Contract Funds
 - Any “Other Categories” that need to be labeled.



CTG4CTK Budget Tracker

Organization Name

Grant Name Match Requirement Grant Year

Instructions: Please start by filling out the top page with information from Appendix A in your contract which outlines your budgeted funds. **Please only fill cells with black outlines and white backgrounds.** You may then use the tabs at the bottom of the page to navigate between the pages to summarize your budget information. If you have any questions, please reach out to your Program Coordinator.

Budget Request

	Contract Funds	Match	Total Required Grant Spend
Salary & Fringe		\$ -	\$ -
Rental of Equipment		\$ -	\$ -
Equipment		\$ -	\$ -
Materials & Supplies		\$ -	\$ -
Subcontract/Consultant		\$ -	\$ -
Other 1		\$ -	\$ -
Other 2		\$ -	\$ -
Other 3		\$ -	\$ -
Other 4		\$ -	\$ -
Other 5		\$ -	\$ -
Total:	\$ -	\$ -	\$ -

Actual Budget

	Total Funds Spent	Total Match Spent	Total Reimbursement	% Δ
Salary & Fringe	\$ -	\$ -	\$ -	#DIV/0!
Rental of Equipment	\$ -	\$ -	\$ -	#DIV/0!
Equipment	\$ -	\$ -	\$ -	#DIV/0!
Materials & Supplies	\$ -	\$ -	\$ -	#DIV/0!
Subcontract/Consultant	\$ -	\$ -	\$ -	#DIV/0!
Other 1	0	\$ -	\$ -	#DIV/0!
Other 2	0	\$ -	\$ -	#DIV/0!
Other 3	0	\$ -	\$ -	#DIV/0!
Other 4	0	\$ -	\$ -	#DIV/0!
Other 5	0	\$ -	\$ -	#DIV/0!
Total:	\$ -	\$ -	\$ -	

Budget Salary Rental Equip Materials Subcontract 1 2 3 4 5 +

Instructions: Please start by filling out the top page with information from Appendix A in your contract which outlines your budgeted funds. **Please only fill cells with black outlines and white backgrounds.** You may then use the tabs at the bottom of the page to navigate between the pages to summarize your budget information. If you have any questions, please reach out to your Program Coordinator.

Instructions (CONT'D)

- Please use the information from your contract to fill the fields.

III. Budget: The Contractor shall adhere to the budget below. The Contractor is responsible for supplying as many staff hours as may be necessary to meet the Contract work requirements. The Contractor shall maintain and keep internal records of staff time. DOAG reserves the right to request internal time records if necessary.

Expense Category	Total Cost
Salary	\$7,750.00
Equipment	\$4,150.00
Materials & Supplies	\$5,700.00
Subcontract/Consultant	\$1,500.00
Other: Honorariums	\$750.00
Subtotal	\$19,850.00
Total Amount: \$19,850.00	



File Home Insert Draw Page Layout Formulas Data Review View Automate Help Acrobat

CTG4CTK Budget Tracker

Organization Name

Grant Name **CTG4CTK** Match Requirement **0%** Grant Year

Instructions: Please start by filling out the top page with information from Appendix A in your contract which outlines your budgeted funds. **Please only fill cells with black outlines and white backgrounds.** You may then use the tabs at the bottom of the page to navigate between the pages to summarize your budget information. If you have any questions, please reach out to your Program Coordinator.

Budget Request

	Contract Funds	Match	Total Required Grant Spend
Salary & Fringe		\$ -	\$ -
Rental of Equipment		\$ -	\$ -
Equipment		\$ -	\$ -
Materials & Supplies		\$ -	\$ -
Subcontract/Consultant		\$ -	\$ -
Other 1		\$ -	\$ -
Other 2		\$ -	\$ -
Other 3		\$ -	\$ -
Other 4		\$ -	\$ -
Other 5		\$ -	\$ -
Total:	\$ -	\$ -	\$ -

Actual Budget

	Total Funds Spent	Total Match Spent	Total Reimbursement	% Δ
Salary & Fringe	\$ -	\$ -	\$ -	#DIV/0!
Rental of Equipment	\$ -	\$ -	\$ -	#DIV/0!
Equipment	\$ -	\$ -	\$ -	#DIV/0!
Materials & Supplies	\$ -	\$ -	\$ -	#DIV/0!
Subcontract/Consultant	\$ -	\$ -	\$ -	#DIV/0!
Other 1	0	\$ -	\$ -	#DIV/0!
Other 2	0	\$ -	\$ -	#DIV/0!
Other 3	0	\$ -	\$ -	#DIV/0!
Other 4	0	\$ -	\$ -	#DIV/0!
Other 5	0	\$ -	\$ -	#DIV/0!
Total:	\$ -	\$ -	\$ -	

Budget Salary Rental Equip Materials Subcontract 1 2 3 4 5 +

Navigation

- Once you've filled out the information on the top sheet, you can then navigate to the sheets located at the bottom of the page.
- If you are not using the category, please skip it and leave the tab blank.
- The tabs correspond with the shortened name of each category, concluding with the "Other" categories listed from 1-5.



CTG4CTK Budget Tracker

Organization Name	LR Legacy				
Grant Name	CTG4CTK	Match Requirement	0%	Grant Year	2025
Instructions: Please start by filling out the top page with information from Appendix A in your contract which outlines your budgeted funds. Please only fill cells with black outlines and white backgrounds. You may then use the tabs at the bottom of the page to navigate between the pages to summarize your budget information. If you have any questions, please reach out to your Program Coordinator.					
Budget Request					
	Contract Funds	Match	Total Required Grant Spend		
Salary & Fringe	\$ 7,750.00	\$ -	\$ 7,750.00		
Rental of Equipment	\$ -	\$ -	\$ -		
Equipment	\$ 4,150.00	\$ -	\$ 4,150.00		
Materials & Supplies	\$ 5,700.00	\$ -	\$ 5,700.00		
Subcontract/Consultant	\$ 1,500.00	\$ -	\$ 1,500.00		
Other 1 Honorariums	\$ 750.00	\$ -	\$ 750.00		
Other 2	\$ -	\$ -	\$ -		
Other 3	\$ -	\$ -	\$ -		
Other 4	\$ -	\$ -	\$ -		
Other 5	\$ -	\$ -	\$ -		
Total:	\$ 19,850.00	\$ -	\$ 19,850.00		
Actual Budget					
	Total Funds Spent	Total Match Spent	Total Reimbursement	% Δ	
Salary & Fringe	\$ -	\$ -	\$ -	-100%	
Rental of Equipment	\$ -	\$ -	\$ -	#DIV/0!	
Equipment	\$ -	\$ -	\$ -	-100%	
Materials & Supplies	\$ -	\$ -	\$ -	-100%	
Subcontract/Consultant	\$ -	\$ -	\$ -	-100%	
Other 1 Honorariums	\$ -	\$ -	\$ -	-100%	
Other 2	\$ -	\$ -	\$ -	#DIV/0!	
Other 3	\$ -	\$ -	\$ -	#DIV/0!	
Other 4	\$ -	\$ -	\$ -	#DIV/0!	
Other 5	\$ -	\$ -	\$ -	#DIV/0!	
Total:	\$ -	\$ -	\$ -	-	

Demonstration

- For this example, we will fill the Materials and Supplies tab.
- Click Materials at the bottom.
- The information from the top sheet has transferred here.
- Add information from your receipts.
 - Date
 - Method of Payment
 - Description
 - Dollar Amount (on the Receipt)
 - Whether the documentation is saved with the line number attached.



A screenshot of a spreadsheet application. The top navigation bar shows tabs: Budget, Salary, Rental, Equip, Materials (selected), Subcontract, 1, 2, 3, 4, 5. A yellow arrow points from the Materials tab to the spreadsheet content. The spreadsheet has a title "MATERIALS AND SUPPLIES". Below the title, there are two summary rows: "Starting Amount" with a value of \$5,700.00 and "Total Match Required" with a value of \$-. Below these is a table with columns: Date, Method of Payment, Description, Dollar Amount, Apply to Match?, and Receipt Saved?. The table has 34 rows, numbered 1 to 34. A green arrow points from the Materials tab to the table. Five blue arrows point upwards from the bottom of the table to the top of the table, indicating data transfer or input. The bottom navigation bar shows the same tabs as the top, with Materials selected. The status bar at the bottom indicates "Page 1 of 2".

Total Funds Spent	\$	5,600.00
Amount Allocated to Match	\$	-
Is the match met?	Yes	
Amount remaining to spend budget up to max	\$	100.00
Total Reimbursement	\$	5,600.00

Demonstration (CONT'D)

- Once you begin filling out information, you may scroll down to the bottom of page 2 and view your summary including:
 - Total funds spent
 - Amount remaining in your budget.
 - Estimated Reimbursement
- Do this for every applicable tab!
- Remember: Please do not modify formulas or edit colored fields.

1	Starting Amount		\$	5,700.00
2	Total Match Required		\$	-
3				
4	Date	Method of Payment	Description	Dollar Amount
5	1	2/24/25 AMEX	Home Depot: Planters	\$ 2,500.00
6	2	3/1/25 VISA	Tractor Supply: Plants	\$ 1,200.00
7	3	4/1/25 AMEX	Lowe's: Soil & Compost	\$ 1,500.00
8	4	4/15/25 Mastercard	Amazon	\$ 400.00
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81	77			
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83	79			
84	80			
85	81			
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87	83			
88	84			
89	85			
90	Total Funds Spent		\$	5,600.00
91	Amount Allocated to Match		\$	-
92	Is the match met?		Yes	
93	Amount remaining to spend budget up to max		\$	100.00
94	Total Reimbursement		\$	5,600.00

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Budget

Salary

Rental

Equip

Materials

Subcontract

1

2

3

4

5

+

Submission

- When you have included all of your relevant receipts, your report is complete and ready to submit.
- You may see your total funds spent and your estimated reimbursement in the “Actual Budget.”
- Gather your receipts into ONE PDF file.
- Head to the [agency portal](#) and submit your budget tracker, receipts, and final report information.



CTG4CTK Budget Tracker

Organization Name	LR Legacy				
Grant Name	CTG4CTK	Match Requirement	0%	Grant Year	2025

Instructions: Please start by filling out the top page with information from Appendix A in your contract which outlines your budgeted funds. **Please only fill cells with black outlines and white backgrounds.** You may then use the tabs at the bottom of the page to navigate between the pages to summarize your budget information. If you have any questions, please reach out to your Program Coordinator.

Budget Request

	Contract Funds	Match	Total Required Grant Spend
Salary & Fringe	\$ 7,750.00	\$ -	\$ 7,750.00
Rental of Equipment	\$ -	\$ -	\$ -
Equipment	\$ 4,150.00	\$ -	\$ 4,150.00
Materials & Supplies	\$ -	\$ -	\$ 5,700.00
Subcontract/Consultant	\$ -	\$ -	\$ 1,500.00
Other 1 Honorariums	\$ -	\$ -	\$ 749.00
Other 2 --	\$ -	\$ -	\$ -
Other 3 --	\$ -	\$ -	\$ -
Other 4 --	\$ -	\$ -	\$ -
Other 5 --	\$ -	\$ -	\$ -
Total:	\$ 12,900.00	\$ -	\$ 12,900.00

Actual Budget

	Total Funds Spent	Total Match Spent	Total Reimbursement	% Δ
Salary & Fringe	\$ 7,750.00	\$ -	\$ 7,750.00	0.00%
Rental of Equipment	\$ -	\$ -	\$ -	#DIV/0!
Equipment	\$ 4,150.00	\$ -	\$ 4,150.00	0.00%
Materials & Supplies	\$ 5,600.00	\$ -	\$ 5,600.00	-1.00%
Subcontract/Consultant	\$ 1,500.00	\$ -	\$ 1,500.00	0.00%
Other 1 Honorariums	\$ 749.00	\$ -	\$ 749.00	0.00%
Other 2 --	\$ -	\$ -	\$ -	#DIV/0!
Other 3 --	\$ -	\$ -	\$ -	#DIV/0!
Other 4 --	\$ -	\$ -	\$ -	#DIV/0!
Other 5 --	\$ -	\$ -	\$ -	#DIV/0!
Total:	\$ 19,749.00	\$ -	\$ 19,749.00	

Budget Salary Rental Equip Materials Subcontract 1 2 3 4 5 +



Questions?

Program Coordinator:

- Hannah Carty
- Phone: (860) 471-1620
- Email: Hannah.Carty@ct.gov
- [Book a Meeting with Me](#)

