**SOUTHCENTRAL MISSISSIPPI WORKS**

**BID BUDGET**

|  |  |  |  |
| --- | --- | --- | --- |
| **Bidder’s Name:** | **Federal Identification Number:** | | **UEI Number:** |
| **Budget Line Item** | | **Cost** | |
|  | |  | |
| **Participant Wages** | |  | |
| **Participant Fringe Benefits** | |  | |
| **Workers’ Compensation** | |  | |
| **Personnel Management Fee (\_\_\_\_\_%)** | |  | |
|  | |  | |
| **TOTAL** | |  | |