

APPENDIX B



HAMILTON COUNTY PUBLIC HEALTH
Strategic Alliance for Health Program

Mentoring Budget Form and Justification
(Insert Community Name)

Proposed Budget Line Items and Justification	Amount
A. Supplies	
<i>Line Item</i> Justification of line item.	
B. Equipment	
<i>Line Item</i> Justification of line item.	
C. Other	
<i>Line Item</i> Justification of line item.	
Total Amount Requested	\$