

CITY OF Meridian

CDBG Hourly Billing Rate Worksheet

The City of Meridian will use this Hourly Billing Rate when processing the staff time portion of your monthly draw for the Community Development Block Grant (CDBG) program. Note that request for reimbursement of staff time should be for actual hours worked to perform duties defined in the contract.

In calculating the Hourly Billing Rate, you may choose to include any of the line items that apply to your employees to calculate your rate. Update calculations as charges occur to your listed rates and percentages (provide documentation for each item updated). Do not include any amount for a benefit that your organization does not provide. Please be advised that HUD and the City require that wages paid by grant funds be documented by hourly time sheets. In order to simplify and standardize this process, the City of Meridian will use the "Total Hourly Billing Rate" at the bottom of this form for each employee on every reimbursement request throughout the grant period.

Attach all time sheets to the reimbursement request. Time sheets must clearly show the number of hours charged to CDBG.

Employee Name: _____ Position Title: _____	
Salaried Position: ___ Yes ___ No If "Yes" Loaded Monthly Rate: _____	
Average number of hours to be worked per month on Meridian's CDBG program.	Average number of Hours anticipated per month for the CDBG program: _____
Hourly rate of pay: <i>This rate is required.</i> (For salaried full-time employees, divide monthly salary by 173.33 hours or annual salary by 2,079.96 hours to calculate an hourly wage.) Update as necessary.	
Health Benefits: (Calculated at the hourly rate of pay.) Update as necessary.	
FICA: (Calculated at 7.65% of the hourly rate of pay.) Update as necessary.	
Unemployment Insurance: (Calculated at 1% of the hourly rate of pay.) Update as necessary.	
Retirement Contribution: (Direct 401 or 457 contribution calculated at the hourly pay rate.) Update as necessary.	
Workers Compensation Insurance: (Workman comp's yearly percentage, x individual's hourly rate, divided by 2,079.96) Update as necessary.	
Other: (Must be reasonable, and allowable under OMB Circular A-122 and pre-approved by City of Meridian. (Please list) Update as necessary.	
Total Hourly Billing Rate:	
Prepared by: (Agency's Payroll Personnel or Accountant)	
Name _____	Title _____ Date: _____