APPLICANT
Central Oklahoma American Indian Health Council, Inc.

DETAILED BUDGET FOR THIS PERIOD (CONTINUED)

	TOTAL AMOUNT REQUIRED (4)	SOURCE OF FUNDS APPLICANT AND OTHER (5)	SOURCE OF FUNDS REQUESTED FROM IHS (6)
9. OTHER DIRECT COSTS			
Postage	$ 2,000.00		
Telephones	6,000.00		
Utilities	2,400.00		
Rent	10,000.00		
Maintenance	3,000.00		
Training	5,000.00		
Board Meetings	2,700.00		
Printing Costs	3,000.00		
Insurance	500.00		
CATAGORY TOTAL	$34,600.00	$	$