

**PROPERTY AND EQUIPMENT BUDGET DETAIL FORM
FOR BHHF-ADMINISTERED PROPERTY AND EQUIPMENT**

GRANTEE NAME		Address	
Description of Capital Expenditure	Approximate Cost	State Account Number	Comments
Authorized Signature		Title	Date
BHHF Approval		Title	Date

This form should be attached to each Target Funding Budget that has an amount listed on line 26, "Property and Equipment Additions." The Target Funding Budget, as well as this form, should then be submitted to the Bureau for Behavioral Health and Health Facilities for approval.