



Request for Application (RFA)

RFA INFORMATION SUMMARY

Application Title:

National Breast and Cervical Early Detection Program (NBCCEDP) Prime Contractor for Eastern Washington

Total Funding Available:

Up to \$240, 000 per year (\$360,000 total for 18 months)

Estimated Number of Awards:

1 to 2

Funding Periods:

January 1, 2026 – June 29, 2026 (Federal Fiscal Year 4 of 5)

June 30, 2026 – June 29, 2027 (renewal for Federal Fiscal Year 5 of 5)

Eligible Applicants:

Any organization with capacity to contract with health clinics in Washington state is eligible to apply.

Eligible organizations include non-profits, universities, local health jurisdictions, community health centers, hospitals and health systems, Accountable Communities of Health, Tribal Nations and Indigenous health organizations, and Community-Based Organizations.

Applicants must demonstrate relevant experience and describe how they will support direct service clinics in administration through technical assistance. Support should focus on providing enrollment for eligible low-income and uninsured or underinsured Washingtonians for breast and cervical cancer screening services.

Grant Summary:

This grant will fund at least 1 organization to improve access to breast and cervical cancer screening. Funding will focus on communities at highest risk for low or no breast and cervical cancer screening rates, including people ages 21 to 65 who have low incomes or lack adequate health insurance. Administration of the NBCCEDP will be via subrecipient coordination from the WA Department of Health Breast, Cervical, and Colon Health Program (BCCHP) team.



People in these communities are less likely to get regular cancer screenings, as recommended by the CDC. Funding will prioritize applicants that demonstrate community partner driven access to life-saving breast and cervical cancer screening for Washington's highest-risk populations.

Informational Call:

November 3, 2025, 9:30 to 11 a.m. PST

Application Due:

Submit applications to by
November 26, 2025, 11:59 p.m. PST.

RFA Coordinator:

Debbie Spink, BCCHPAApplications@doh.wa.gov

Direct all communication about this RFA to the RFA coordinator above with
"BCCHP Eastern Washington RFA" in the subject line.

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Section 1: Application Instructions

1.1. Orientation to the RFA

Introduction and Purpose

This funding opportunity will support at least 1 organization to administer the National Breast and Cervical Cancer Early Detection Program (NBCCEDP) through the Washington State Department of Health (DOH). The selected organization(s), referred to as the Prime Contractor(s) (PC), will serve the following counties within Eastern Washington: Adams, Ferry, Garfield, Lincoln, Pend Oreille, Spokane, Stevens, and Whitman.

The goal of this funding is to **reduce cancer risk** across Washington **by improving access to breast and cervical cancer screening services in Eastern Washington** for people at highest risk.

We're seeking organizations that:

- Understand the factors that affect health and are equipped to help clients navigate barriers to care.
- Demonstrate strong administrative skills, including verifying NBCCEDP eligibility, enrolling participants, processing claims, and submitting invoices on time and in line with contract requirements.
- Proactively seek technical assistance to help clinics use evidence-based approaches to identify, refer, and support people eligible for NBCCEDP services.
- Understand the region's health needs and develop strategies to expand services for those most at risk.
- Build and maintain relationships and conduct outreach with communities, clinics, and partner organizations.
- Share a commitment to expanding access to services across Eastern Washington and meeting the regions' unique and relevant needs.
- Provide care coordination that helps address barriers to screening and diagnostic services, such as provider availability, transportation, wait times, communication challenges, and access to childcare.

Funding Priorities

Organizations must demonstrate the ability to increase access for people with the greatest need and those at higher-than-average risk, including:

- People **not eligible for Medicaid (Apple Health)**



- People **not eligible for Medicare**, or who do not have access to Medicare Part B
- People who are **uninsured or underinsured**
- People with **incomes below 250% of the Federal Poverty Level (FPL)**
- In regions with concurrent supplemental funding, people with income **up to 300% FPL** may qualify for the NBCCEDP
- .

Successful applicants will already work with, or have strong partnerships with, community-based organizations that serve priority populations. Applicants should be well-positioned to address barriers to clinical care via care navigation to support NBCCEDP eligible participants in connecting with service providers and following up on abnormal screenings.

Note: NBCCEDP coverage for breast cancer screening services align with CDC recommendations for routine screening begins at 40 years of age. Non-routine diagnostics may be covered for qualifying individuals with need on a case-by-case basis.

Prime Contractor Responsibilities

Organizations that receive funding will be subrecipients of the federal NBCCEDP funds issued by the Centers for Disease Control (CDC). Prime contractors will be expected to:

- **Subcontract with direct service providers:** Contract with service providers who will provide breast and cervical cancer screening services for NBCCEDP eligible and enrolled participants. Providers should also help participants navigate diagnostic care after abnormal readings.
- **Engage with partners:** PCs are expected to support partner clinics' success and routinely offer technical assistance opportunities for evidence-based intervention (EBI) integration to strengthen NBCCEDP service delivery. PCs will receive support from DOH's BCCHP team and the University of Washington Alliance for Reducing Cancer, Northwest (ARC-NW) team, a NBCCEDP partner.
- **Invoice DOH for services:** Submit timely invoices aligned with contract language terms. Invoice should be accompanied by supporting documentation requested in the contract budget.
- **Report progress:** Submit quarterly progress reports to DOH with updates on screening activities, rates, and progress or barriers experienced by participating clinics or by your organization. Submit a final close-out report within 45 days of the end of performance period.

- **Respond to program surveys:** Complete a baseline survey at the start of contract and an annual survey at the end of each performance year to capture relevant information about prime contractor region and subcontracted clinics' characteristics.
- **Conduct annual environmental assessment:** Assess opportunities to build potential partnerships that improve services for communities at highest risk.
- **Maintain diagnostic provider lists:** Share a current list of contracted diagnostic providers to all clinics.
- **Support progress evaluation:** Help clinics comply with all program requirements through routine program evaluation. Align progress evaluation with quarterly progress reporting due to DOH's BCCHP team. The DOH team can support with progress evaluation by creating a tailored template.
- **Support subcontracting clinics in completing the WISEWOMAN Readiness Assessment:** Assess clinics to identify sites as high-benefit and best-positioned for NBCCEDP and WISEWOMAN coordination.

Note: If an NBCCEDP clinic is also a WISEWOMAN site, the PC is responsible for supporting eligibility verification and enrollment of WISEWOMAN participants. Additional funding may be available based on administrative needs.

Prime Contractor Objectives and Required Activities

I. Program Management

- Maintain operations within defined scope of work, budget, and performance period. Include strategic oversight from staff responsible for program management, data management and entry, and fiduciary functions and stewardship. DOH's BCCHP supports flexible staffing models that best meet the needs of your organization and the community it serves with respect to NBCCEDP administration.
- Develop and maintain adequate staffing plan to promote NBCCEDP services, eligibility, and how to get started with enrollment. Prioritize reaching community members at highest risk for missed or infrequent cancer screenings and, when relevant, coordinate with those at increased risk of cardiovascular disease.

II. Community Outreach and Engagement



- Identify and leverage outreach opportunities in the region to disseminate NBCCEDP services, eligibility, and enrollment initiation messaging. Tailor your engagement approach to how communities want to receive and access this information.

III. Patient Navigation and Partnerships

- Prioritize partnerships with community and clinical organizations that serve high-risk populations, defined in this grant as people with low incomes who are uninsured or underinsured. For this grant, underinsured refers to individuals who experience financial hardship even though they have health insurance.
- Support integration of evidence-based intervention within clinical workflows and care cascades. Identify clinical or community partners that could benefit from technical assistance and request from DOH as needed.

IV. Clinical Quality and Performance Improvement

Prime contractors must:

- Communicate regularly with contracted clinics to understand both strengths and challenges in delivering NBCCEDP services.
- Ensure eligible people are identified, enrolled, and connected to breast and cervical cancer screening services.
- Establish clear processes to follow up with participants who have abnormal results and support navigation to diagnostic care and treatment.
- Integrate key performance indicators (KPIs) into ongoing quality improvement efforts.
- Work with DOH's BCCHP team to provide or coordinate technical assistance as needed. Actively collaborate in developing action plans that help clinics meet NBCCEDP administration goals.
- Provide the WISEWOMAN Readiness Assessment to contracted clinics to identify sites that may be a good fit for coordinated health promotion for NBCCEDP-eligible individuals.
- For clinics participating in both NBCCEDP and WISEWOMAN, support continuous quality improvement to integrate evidence-based interventions. These efforts



should improve identification, enrollment, provider connection, and follow-up navigation for eligible individuals.

- Identify NBCCEDP participants aged 35 to 64 who have high blood pressure, a family history of high blood pressure, or a history of cardiovascular disease for WISEWOMAN referral.
- Connect WISEWOMAN participants to healthy lifestyle programs that are appropriate for their community and clinical settings. The BCCHP team will help contractors identify suitable programs that meet grant requirements.

Preferred Additional Activities

Contractors are encouraged to:

- Address health-related care coordination and patient navigation. Support clinics in documenting these needs using Zip codes to support additional reimbursement when applicable.
- Set up workflows to identify NBCCEDP participants who are also eligible for colorectal cancer (CRC) screening.
- Ensure clinics routinely identify people eligible for CRC screening and maintain documentation of participation, including eligibility criteria, risk-based screening method based, and follow-up after screening.
- Increase program enrollments across the region.

Eligibility

Organizations eligible to apply include:

- Community-Based Organizations (CBOs)
- Health care providers like clinics, hospitals, health centers, or private practices
- Tribal Nations, Urban Indian Organizations, or Indigenous Health Organizations
- Colleges, universities, and other higher education institutions
- Government agencies or local health jurisdictions (LHJs)

While the current model typically awards 1 prime contractor per region, DOH recognizes that the mix of urban and rural communities across multiple counties in Eastern Washington may benefit from a more flexible approach. To ensure full coverage and meet diverse local needs, more than 1 prime contractor may be selected.



Applicants are encouraged to propose flexible models, including collaborative, geographically based partnerships, to support comprehensive service delivery across the region. The Department of Health’s BCCHP team welcomes proposals that describe how shared administration could benefit your organization and the communities it serves in Eastern Washington.

If you would like to explore a shared administration model, DOH invites you to discuss further. Please email Elisa Collins, WA DOH Breast and Cervical Data Manager, Elisa.Collins@doh.wa.gov for conversation and coordination.

1.2 Funding – Availability and Timeline

Funding Availability & Timeline

This funding opportunity comes from a CDC grant awarded to the Department of Health.

Final award amounts to successful applicants are subject to the availability of funds and approval from the CDC. Department of Health’s BCCHP team anticipates contracts will begin January 1, 2026, and run for 18 months, ending on June 29, 2027, which aligns with current federal fiscal year for the NBCCEDP cooperative agreement.

The Breast, Cervical and Colon Health Program team plans to pursue continued funding for the next NBCCEDP cooperative agreement and looks forward to partnering with the Eastern Washington Prime Contractor throughout that application process.

RFA Release Date	October 10, 2025
Application Due Date	November 26, 2025, at 11:59 p.m. PST
Application Review	November 17, 2025 – December 1, 2025
Notification of Contract Awards	Early December 2025
Contract Fully Executed by	January 01, 2026
Expected Period of Award	January 01, 2026 – June 29, 2027
Estimated Annual Funding Range	Up to \$240,000 per year (\$360,000 for 18-month contract)

Fiscal Requirements for DOH Contracts

- This funding comes from a federal grant awarded to the Department of Health. Because DOH was initially awarded this grant and is now passing these funds to other organizations, funded organizations are known as “subrecipients.”



- Subrecipient funding has stricter guidelines around expenses and reimbursement than state or private funding. At a minimum, organizations must have a budget large enough to pay for services before reimbursement. They must also have specific financial controls and tracking systems in place so they can invoice properly. Other requirements include:
 - If you receive the funding, DOH will set up subrecipient contracts for cost reimbursement. This means you will submit invoices for allowable costs and will then be reimbursed by invoicing DOH. Find more information on allowable costs in Appendix A.
 - Subrecipients must submit invoices to DOH each month. Once you submit a correct and timely invoice, it may take DOH several weeks to process the invoice. Please keep this in mind when planning your budgets and submitting invoices.
 - You are required to have a Unique Entity Identifier Number, Washington Unified Business Number, Federal Tax, and Statewide Vendor numbers to contract with DOH and receive payment.

1.3 Application Support – Informational Calls and Office Hours

Office Hours

Applicants can email BCCHPAApplications@doh.wa.gov with application questions. DOH staff will also be available to answer questions at the following times:

When: Monday, November 3, 2025 from 9:30 to 11 a.m. PST

Where: [Teams](#)

- Meeting ID: 266 592 589 945 5
- Passcode: JQ3ku72H
- Dial in by phone: [+1 564-999-2000](tel:+15649992000),,[813324164#](tel:+15649992000)

You don't need to register for these office hours. Office hours will operate on a drop-in basis.

1.4 Application Process and Evaluation Criteria

Submission Process

- Complete applications are due **November 26, 2025, at 11:59 p.m. PST**. Please email all materials to BCCHPAApplications@doh.wa.gov in a single PDF file or Word document attachment.



- An ad-hoc Eastern Washington RFA committee consisting of subject matter experts and invested thought partners will score applications.
 - We may ask high-scoring applicants to schedule a discussion with the selection committee. This meeting will allow the committee to ask follow-up questions and help clarify the applicant's materials.
- Funding decisions will be announced by **mid-December 2025**.

Application Checklist

All applications must include the following application materials:

- Application Information Sheet
- Letter of Interest Sheet
- Impact Statement (4 page maximum)
- Implementation Plan
- Data Management Planning Sheet
- Project Budget and Narrative (1 page maximum)
- Two Letters of Support (1 page maximum per letter)

Evaluation Criteria

Selection Criteria	Description	Points
Application Information Sheet	Application information sheet is complete and applying organization is eligible. All required items are received together before or by November 26, 2025 , deadline and are complete.	20
Letter of Interest	Applicant provides detailed descriptions of the organization, services offered, prospective partners and their roles in community engagement, direct clinical services, and person-centered care coordination and navigation to support increased breast and cervical cancer screening for people of high cancer risk eligible for NBCCEDP in Eastern WA. This area should focus on how an applicant's strategy will leverage respective partner strengths.	20
Impact Statement	Proposal explains how your organization will support connecting priority populations, as defined below, with	20

	<p>Federally Qualified Health Centers (FQHCs), community clinics, or other health facilities in offering breast and cervical screening services to priority populations — defined in this RFA as people who are high risk of not receiving recommended screening due to the following factors:</p> <ul style="list-style-type: none"> • Age 21 to 65 • Low income • Uninsured (lack of health insurance) • Underinsured (limited coverage or experience financial hardship) 	
Implementation Plan	<p>Realistic and well-supported objectives that align with the functions of Prime Contractors. Objectives should build on existing partnerships in Eastern Washington and speak to the strategy to support increase in access to breast and cervical cancer screening and care coordination as relevant through regionally tailored messaging, outreach, and follow-up.</p>	20
Budget with Narrative	<p>Budget is realistic and aligned with responsibilities of a Prime Contractor and the objectives of this grant. Narrative should speak to partnerships in Eastern Washington and the strategy they support to increase access to breast and cervical cancer screening and coordinated care as relevant through regionally tailored messaging, outreach, and follow-up. Position FTE allocation should be considered in budget narrative and in alignment with relevant roles of NBCCEDP administration.</p>	20
Total		100



Section 2: Application Materials

Please complete and submit the following components in a single document (Word or PDF) to BCCHPAApplications@doh.wa.gov by **November 26, 2025, by 11:59 p.m. PST.**

2.1. Application Template

Applicant Information Sheet & Eligibility

Name of Organization	
Address	
Project Manager	
Title	
Telephone	
Email	
Tax Identification Number (TIN)	
Unique Entity Identifier (UEI)**	
WA UBI number **	
Statewide Vendor Number **	
How much funding you're requesting (up to \$360,000)	

** If you do not have these numbers at the time of your application, you will need to apply and receive them before having a contract in place with WA DOH. Allow at least 30 days to get these numbers. This can be completed after the award announcement.

You can use the following links to request these numbers:

- Unique Entity Identifier: [Entity Registration | SAM.gov](#)
- WA UBI: [Registrations and filings required for businesses | Washington Department of Revenue](#)
- Statewide Vendor Number: [Vendor Payee Registration | Office of Financial Management \(wa.gov\)](#)
- Follow this link for more support applying for this number: [Apply for a Statewide Vendor Number](#)

Print Name of Authorized Signatory



Signature of Authorized Signatory

Title



Letter of Interest Sheet

Provide a brief overview of your organization's mission, vision, and values. Describe your organization's role in the community or region and the services you currently offer. Why is your organization a good fit for this funding opportunity?

How does your organization support communities in addressing access-related barriers to cancer screening? If applicable, please describe your work addresses health-related social needs, such as transportation or financial hardship.



Describe the key community and clinical partners you plan to work with to expand and sustain access to breast and cervical cancer screening services in Eastern Washington. Your collaboration plan should focus on supporting people eligible for NBCCEDP, specifically women ages 21 to 65 who have low incomes and are uninsured or underinsured.

Your response should explain how each partner will help improve access to screening services in Eastern Washington communities with the highest risk. Please include how your collaboration will support community outreach strategies, direct clinical delivery, and response to health-related social needs and care navigation.

Organize your response in a way that clearly explains how the collaboration will work. Be sure to address the following:

- Who will you partner with to raise awareness of NBCCEDP among community members at above average risk for missed or no screenings?
- Who will your organization partner with to deliver direct breast and cervical cancer clinical services?
- Who will you partner with in your region to address health-related social needs response, or care navigation and coordination?



Impact Statement (4 page maximum)

Please respond to the following prompts. You may expand on each as needed, but please do best not exceed the page limit. This section can be submitted as a PDF document in your application package.

A. Vision

- Describe how your organization would implement NBCCEDP and oversee the administration of this grant. Include how you would manage the grant in collaboration with the partners mentioned in your narrative above.

B. Engagement

For each of your current or planned partnerships identified that support this funding opportunity, goals, and objectives in Eastern Washington, please describe:

- Where is the partner based within the Eastern Washington region?
- Who does the partner serve? Please describe the specific populations or communities they work with.
- Are there any known considerations that should be considered when coordinating outreach and care?

C. Organizational Capacity

- Who will be the primary point of contact for contracted clinics administering NBCCEDP?
- Who will be the primary point of contact to WA DOH's BCCHP team?
- How will you support FQHCs, clinics, and other facilities to offer screening services to priority populations?
- What additional staff will support the administration of NBCCEDP and how much of their time will support the program?



Implementation Plan

Please complete the Year 1 implementation plan template for your project — January 1, 2026 to June 29, 2026. This period covers the first 6 months of the funding (federal fiscal year 4).

For each planned activity, include a short description and the programmatic strategy it supports.

During this phase, your focus should be on strategy planning for implementation and launch. This includes organizing the internal structure of your organization to best serve the region and working with your partners.

Tell us what activities you plan to complete during this time.

Goal 1:			
Strategy 1:			
Activity	Responsible Party	Estimated date of completion	Notes
Strategy 2:			
Activity	Responsible Party	Estimated date of completion	Notes
Goal 2:			
Strategy 1:			
Activity	Responsible Party	Estimated date of completion	Notes
Strategy 2:			
Activity	Responsible Party	Estimated date of completion	Notes

Data Management Planning

Note: Final data management and evaluation plans will be completed in coordination with BCCHP team evaluator.

Provide a brief overview of who will be responsible for data management, data entry, and managing any data point clarification for this project.



You don't need to have all the details finalized in advance, but you should have a general idea of who will be accountable for the day-to-day coordination of data elements for this grant work. This includes invoicing for clinical billing related to data entry.

Project budget

Please complete the budget template for Year 1 of your project. You can request up to \$240,000 per year. Include a **detailed description** and justification that supports the project narrative included as part of this application packet.



You can find an Excel template on the [BCCHP webpage](#). Submit your completed budget as an Excel file or PDF document as part of your application package.

Budget Category	Year 1 Budget	Year 2 Budget	Total Budget	Description
A. Employee Wages				
B. Fringe Benefits				
C. Travel				
D. Equipment				
E. Supplies				
F. Contracts				
G. Construction				
H. Other				
Total Direct Costs				
I. Indirect Costs				
Total Project Budget				



Letter of Support Guidance

Please provide a minimum of 2 letters of support with your application packet.

Letters of support may be written by:

- Clinics wishing to participate in NBCCEDP as screening service provider.
- Community-based organizations who serve members of the priority populations listed within Section 1.1 of this RFA and who wish to collaborate on NBCCEDP.
- Other agencies or local partners who wish to participate in NBCCEDP or can support the goals and vision of your proposal.

Each letter of support should detail how the partner(s) intends to work with your organization and support your application. Letters can highlight 1 or more of the following:

- The potential impact of your organization's services—both for the partner and for the community they serve.
- How the partner will build connections and expand trust in communities in Eastern Washington.
- Why your organization is ideally positioned to serve as a Prime Contractor in Eastern Washington.

Appendix

A. Allowable Cost Guidance

The [National Breast and Cervical Cancer Early Detection Program \(NBCCEDP\)](#) is funded through the CDC. As such, it is subject to Federal cost requirements. All costs incurred by the subrecipient under the NBCCEDP award must be:

1. Necessary and reasonable for the performance of the contracted project
2. Adequately documented

The table below is intended to provide guidance to applicants on relevant allowable costs under the NBCCEDP. This table doesn't include all federal cost requirements. You can check [2 CFR 200](#) for detailed cost requirements. If you're uncertain whether a specific cost is allowed, you should confirm cost requirements with DOH.

Cost Item	Allowable	Prohibited
Advertising	<ul style="list-style-type: none"> Recruiting personnel Acquiring goods and services Program outreach needed for grant activities 	<ul style="list-style-type: none"> Cost of meetings, conventions, convocations, or other events, including the costs of displays, demonstrations, meeting rooms and the wages of employees setting up the exhibits or meetings. Promotional items
Advisory councils		<ul style="list-style-type: none"> The cost of advisory committees, without written approval.
Alcohol		<ul style="list-style-type: none"> Alcoholic beverage costs.
Compensation	Compensation that is in alignment with CFR 200.430 and related to grant activities.	
Benefits	Fringe benefits provided in alignment with CFR 200.431 , including, but not limited to paid	

	<p>time off, employee insurance, retirement, and unemployment benefits, provided:</p> <ul style="list-style-type: none"> • The costs are equitably allocated if an employee is paid via multiple funding streams. • The benefits are provided to the employee under established benefits policies of the organization. 	
Conferences	<p>Hosting or sponsoring of conference costs, including:</p> <ul style="list-style-type: none"> • Speakers' fees • Meals • Transportation (written approval is required for out of state travel costs,) • Other incidentals 	<ul style="list-style-type: none"> • Honorariums
Entertainment		<ul style="list-style-type: none"> • Amusement and social activities, unless directly related to grant activities and approved in writing.
Equipment and capital expenditures	<ul style="list-style-type: none"> • Capital expenditure for special purpose equipment, as long as items with a unit cost of \$10,000 or more have written approval. 	<ul style="list-style-type: none"> • Expenditures for general purpose equipment, buildings, and land or for improvements to land, buildings, or equipment, unless approved in writing.
Fundraising		<ul style="list-style-type: none"> • Costs associated with organized fundraising, including donation solicitation.

General costs of government	<ul style="list-style-type: none"> Salaries and expenses of Indian Tribes and Councils of Governments (COGs), provided they are in alignment with CFR 200.444. 	<p>General costs of government, including:</p> <ul style="list-style-type: none"> Salaries and expenses of the chief executive Judicial branch Prosecutorial activities General government services (including police and fire)
Goods or services for personal use		<p>Costs of goods or services for personal use, unless approved in writing. This includes:</p> <ul style="list-style-type: none"> Housing costs Housing allowances Personal living expenses
Insurance	<ul style="list-style-type: none"> Costs of insurance required or approved by HRSA 	
Lobbying		<p>Costs of influencing activities, including those intended to:</p> <ul style="list-style-type: none"> Obtain grants or contracts Influence a member of the Federal government Influence Federal, state, or local elections or initiatives
Maintenance and repair	<p>Some costs for maintenance, janitorial services, repair, or upkeep of building or equipment, provided the maintenance or repairs do not add to the permanent value of the property nor considerably extend its intended life are allowable. These costs must be appropriately allocated to the grant. Refer to CFR 200.452 for more information.</p>	

Materials and supplies, including computing devices	Reasonable and necessary costs for materials, supplies, and fabricated parts necessary to the grant activities, provided they are charged at their actual prices.	
Memberships, subscriptions, and professional activity costs	<ul style="list-style-type: none"> • Cost of memberships or subscriptions in business, technical, and professional organizations or periodicals provided they are for the organization and not an individual. • Cost of memberships or subscriptions in civic or community organizations, with approval. 	<ul style="list-style-type: none"> • Cost of memberships in a country, social, or dining club • Cost of membership in organizations primarily dedicated to lobbying
Organizational costs		Costs to the organization, such as incorporation fees, attorneys, accountants, etc., unless authorized
Participant support costs	<p>Participant support costs*, with approval, including:</p> <ul style="list-style-type: none"> • Stipends • Registration fees • Subsistence allowances <p>*If organizations are using de minimis or Modified Total Direct Costs (MTDC) to calculate in direct costs, participant support costs cannot be included.</p>	
Professional service costs	<ul style="list-style-type: none"> • Costs of consultants provided the costs are reasonable for the services rendered and the service is necessary for grant activities. 	

Public relations		Public relations, including community relations and activities dedicated to maintaining the recipient's or subrecipient's image or maintaining or promoting understanding and favorable relations with the community or public at large or any segment of the public.
Publication and printing costs	<ul style="list-style-type: none"> Publication and printing feeds for electronic and print media. 	
Scholarships and student aid costs		Costs of scholarships, fellowships, or other student aid, without prior approval
Training and education	<ul style="list-style-type: none"> The cost of training and education for employee development. 	
Transportation costs	<ul style="list-style-type: none"> Costs for postage, freight, and other transportation relating to goods purchased, in process, or delivered. 	
Travel costs	<ul style="list-style-type: none"> Travel costs may be charged on an actual cost basis, following the recipient organization's written travel policies that align with CFR 200.475. Out of state travel requires prior written approval. 	