

Devices and Technology Subprogram Project Budget Template

| | |
|------------------------|----------------------------------|
| Applicant Name: | Taylor Farms General Partnership |
| Project Name: | Water Efficiency |
| Date: | January 16, 2025 |

1. Project Budget Summary

| Category | Total Cost |
|--------------------------------|---------------------|
| Traceability Solutions | \$ |
| Soil Health Products | \$ |
| Water Management Tools/Sensors | \$ 87,276.80 |
| Autonomous Solutions | \$ 0.00 |
| Installation and Integration | \$ 7,000.00 |
| TOTAL PROJECT COST | \$ 94,276.80 |

2. Detailed Budget Breakdown

| Category | Item/Description | Cost Per Unit | Quantity | Total Cost |
|--------------------------------|--------------------------------|---------------|----------|---------------------|
| Water Management Tools/Sensors | AgSense Field Commander | \$ 1601.42 | 40 | \$ 64,056.80 |
| Water Management Tools/Sensors | Sentek soil moisture equipment | \$ 2730.00 | 8 | \$ 21,840.00 |
| Installation and Integration | Labor | \$ 125.00 | 40 | \$ 5,000.00 |
| Installation and Integration | Mileage | \$ 50.00 | 40 | \$ 2,000.00 |
| Installation and Integration | Installation Kit (Sentek) | \$ 1380.00 | 1 | \$ 1,380.00 |
| | | \$ | | \$ 0.00 |
| | | \$ | | \$ 0.00 |
| | | \$ | | \$ 0.00 |
| | | \$ | | \$ 0.00 |
| | | \$ | | \$ 0.00 |
| | | \$ | | \$ 0.00 |
| | | \$ | | \$ 0.00 |
| | | \$ | | \$ 0.00 |
| Total | | | | \$ 94,276.80 |

3. Contribution Summary

| Item | Amount | Documentation Attached (Y/N) |
|------------------------------|---------------------|------------------------------|
| Total Project Cost | \$ 94,276.80 | Yes |
| Less: Applicant Contribution | \$ 0.00 | No |
| Less: Partner Contribution | \$ 0.00 | No |
| PRO-AG Grant Request | \$ 94,276.80 | |

4. Additional Notes:

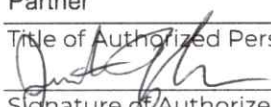
Certification: I hereby certify that the budget outlined above accurately reflects the allowable costs and contributions for the proposed project and that all contributions will be used solely for allowable expenses as defined by the PRO-AG Program Guide.

Justin Taylor 1/16/25

Printed Name of Authorized Person Date

Partner

Title of Authorized Person



Signature of Authorized Person

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