

FOUNDATION



PROJECT BUDGET REPORTING FORM

THIS FORM MUST BE COMPLETED AND INCLUDED WITH ALL GRANT APPLICATION PROPOSALS.
 COMPLETE ONLY COLUMN (1) WITH APPLICATION PROPOSAL.
 COLUMNS (2) AND (3) ARE TO BE COMPLETED AT END OF PROJECT.
 ROUND ALL AMOUNTS TO THE NEAREST DOLLAR
PLEASE NOTE: PROJECT REVENUE MUST EQUAL PROJECT EXPENSES

Organization Name:	
Project Name:	
Project Start Date:	Project End Date:

I. REVENUES:	(1)	(2)	(3)
	Proposed Project Revenue	Actual Project Revenue	Balance
A. Grants: Committed/pending			
1. CCCF/pending	\$	\$	\$
2.	\$	\$	\$
3.	\$	\$	\$
4.	\$	\$	\$
5.			
B. Individual/corporate gifts	\$	\$	\$
C. Events / fundraisers	\$	\$	\$
D. Membership Income	\$	\$	\$
E. In-Kind Support	\$	\$	\$
F. Other (specify)	\$	\$	\$
	\$	\$	\$
Total	\$	\$	\$

II. EXPENSES:	(1)	(2)	(3)
	Proposed Project Expenses	Actual Project Expenses	Balance
General Operations			
A. Salaries	\$	\$	\$
B. Payroll Taxes and Fringe Benefits	\$	\$	\$
C. Consultants and Professional Fees	\$	\$	\$
D. Travel	\$	\$	\$
E. Equipment	\$	\$	\$
F. Printing and Copying	\$	\$	\$
G. Postage and Delivery	\$	\$	\$
H. Training	\$	\$	\$
I. Evaluation	\$	\$	\$
J. Marketing	\$	\$	\$
K. Other (specify)	\$	\$	\$
L. Other (specify)	\$	\$	\$
M. Other (specify)	\$	\$	\$
Total Date	\$	\$	\$

PREPARED BY: _____