

Reidsville Area Foundation PROJECT BUDGET FORM

Applicant: _____

Project: _____ Date: _____

SECTION ONE – PROJECT INCOME

List each actual and/or anticipated source of funding for this project ONLY.

Funding Sources

Check one

| | Amount | Funds committed | Funds requested |
|-----------------------------|--------|-----------------|-------------------------------------|
| Reidsville Area Foundation | | | <input checked="" type="checkbox"/> |
| | | | |
| | | | |
| | | | |
| | | | |
| Total Project Income | | Box 2 | |

SECTION TWO – PROJECT EXPENSES

List expenses for this project. On a separate page, provide brief descriptions of any items that are not self-explanatory.

| <i>Expenses</i> | Amount | Amount of item to be funded by Foundation grant |
|------------------------|--------|---|
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |

Total Project Expense

| | |
|--|--|
| | |
|--|--|

Should match Box 2 Should match Box 1