

**ORGANIZATION BUDGET INFORMATION:** Please provide your organization's most recent and complete local financial information. If you are an affiliate or division of a larger organization, provide only information related to your local/division level operations. This information is required for consideration of your grant proposal.

Fiscal Year: \_\_\_\_\_ Month: \_\_\_\_\_ to Month: \_\_\_\_\_

	Total Budget	Received YTD	% Over/ Under	Notes
<b>Income</b>				
Government				
Earned Income/Fees				
Individual Contributions				
United Way				
Investments/Interest Earned				
Corporate/Foundations (list below)				
Special Events				
Memberships				
Other (explain)				
<b>Total Income</b>				

	Total Budget	Expended YTD	% Over/ Under	Notes
<b>Expenses</b>				
Employee Salaries				
Employee Benefits				
Overhead - Rent, utilities, etc.				
Equipment/Supplies/Postage				
Professional Fees/Consultants				
Travel				
Marketing/PR/Printing				
Training				
Special Events				
Other (list below)				
<b>Total Expense</b>				