

The purpose of this Budget Form is to provide the JWF with complete information about your Project's projected Expenses and Revenues. You may scan, reproduce, photocopy, or download this form from www.jwfdetroit.org.

Please also indicate the time period that this Budget covers:

_____, 2017 through _____, 2018

	(A) Total Expenses	(B) Amount Requested
I. PROJECT EXPENSES:		
Salaries		
Payroll Taxes		
Fringe Benefits		
Consultants & Professional Fees		
Insurance		
Travel		
Equipment		
Supplies		
Printing & Copying		
Telephone & Fax		
Postage & Delivery		
Rent		
Utilities		
Maintenance		
Evaluation		
Marketing		
Other (<i>Specify</i>)		
Other (<i>Specify</i>)		
TOTAL EXPENSES	0	0

	(C) Committed Revenue	(D) Pending Revenue
II. SOURCES OF REVENUE:		
Grants/Contracts/Contributions:		
Government*		
Foundations*		
Corporations*		
Individuals		
Earned Income (<i>Admissions, Fees, etc</i>)		
In-Kind Support (<i>Indicate Source</i>)*		
Other Revenue (<i>Specify</i>)		
SUBTOTAL REVENUE	0	0

III. (E) TOTAL REVENUE (C plus D)

0

IV. PROJECT FUNDS NEEDED

Total Expenses in Excess of Committed Revenue

(A minus C)

0

Total Expenses in Excess of Total Revenue

(A minus E)

0

V. AMOUNT REQUESTED FROM JWF**

Must Equal Total Requested (B)

0

VII. ALLOCATION OF AMOUNT REQUESTED

Requesting Organization

Collaborative Organization 1

Collaborative Organization 2

0

TOTAL REQUESTED

*** Please itemize Sources of Revenue from Government, Foundations and Corporations in your Budget Narrative. Be sure to include the value of In-Kind Support in both Expenses and Revenue on this form and explain in your Budget Narrative.**