

Agency: \_\_\_\_\_

Fiscal \_\_\_\_/\_\_\_\_

Proposed \_\_\_\_/\_\_\_\_

**REVENUE:**

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Membership Dues	_____	_____
Donations	_____	_____
Fund Raisers	_____	_____
U.G.N.	_____	_____
Other (Explain): _____	_____	_____
_____	_____	_____
<b>Total Revenue</b>	----->	_____

**COST/EXPENDITURES:**

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Salaries	_____	_____
Salary Taxes & Benefits	_____	_____
Supplies	_____	_____
Telephone	_____	_____
Postage & Shipping	_____	_____
Rent	_____	_____
Meals & Lodging	_____	_____
Insurance	_____	_____
Equipment Replacement	_____	_____
Equipment Maintenance	_____	_____
General Maintenance	_____	_____
Specific Assistance to Individuals	_____	_____
Awards/Grants/Scholarships	_____	_____
Misc. (Explain): _____	_____	_____
_____	_____	_____
Cash Reserve (Subtract)	_____	_____
Cash Reserve Shortage (Add)	_____	_____
<b>Total Cost &amp; Expenditures</b>	----->	_____

**Revenue and Expenditures should be equal**