

**FORM C
PROGRAM REQUEST BUDGET**

Name of Organization: _____

Time Period: _____

<i>Items typical for operating a program:</i>	
REVENUES/SUPPORT	BUDGET
Corporate grants	
Foundation grants	
Gov't. grants/contracts/per diem (identify)	
Contributions	
United Way	
Other federated campaigns (identify)	
Fine Arts Funds	
Membership dues	
Special events, fundraisers	
Sponsorships	
Admissions	
Sales, rent	
Revenue, tuition	
Investment income	
Interest, dividends	
Other	
Total Revenue Support	
EXPENSES	
Salaries	
Employee benefits, taxes	
Professional fees	
Equipment, supplies, materials	
Telephone, utilities	
Postage, mailing	
Occupancy	
Insurance	
Training, staff development	
Travel	
Conferences	
Evaluations	
Other	
Total Expenses	
Revenue less Expenses	

If expenses exceed revenues/support, please explain how difference will be offset. Accompanying narrative is welcome if additional explanation is warranted; for example, an explanation of in-kind gifts. You may use a simplified version of this chart if preferred.