## PROPOSED BUDGET

## NOTE: APPLICANTS MUST USE A BUDGET FORM SIMILAR TO THIS ONE. PLEASE PROVIDE AS MUCH DETAIL AS POSSIBLE ON THIS SPREADSHEET.

|  |  |
| --- | --- |
| **Proposed Expenditures** | **Proposed Amount** |
| Please provide all budget details below: | Provide proposed expenditure amount |
| Personnel |  |
|  |  |
|  |  |
|  |  |
| Travel/Training |  |
|  |  |
|  |  |
| Materials & Supplies |  |
|  |  |
|  |  |
|  |  |
|  |  |
| Facility Costs |  |
|  |  |
|  |  |
| Other |  |
|  |  |
|  |  |
|  |  |
| **Total Proposed Expenditures** |  |
| Proposed Revenue - Provide all sources of revenue below, including in-kind services and/or donations. | Provide proposed revenue amount |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
| **Total Proposed Revenue** |  |
|  |  |
| **FCSS Funding Request:** |  |

Thank you for your submission.