	A	В	С	D	E	F	G
1	Willia	amsbu	rg Cor	nmunity	Founda	tion	
2	Program/Project Budget Form						
3	a						
5	Complete this	s form using	Excel. For	mulas will be co	mpleted as you er	nter the data.	
6	ORGANIZATION NAME: XYZ Organization						
7	THE OF GAMERATOR						
8				WCF	Other Support		Totals
9				Request	Cash	In-Kind	100015
10	I. PERSONNEL						
11	Position	Salary	% Time				
12	Director	\$60,000	5%	\$0	\$3,000		\$3,000
13	Manager	\$35,000	5%	\$0	\$1,750		\$1,750
14	Assistant	\$16,000	5%	\$0	\$800		\$800
15							\$0
16							\$0
17							\$0
-	Subtotal Personnel:			\$0	\$5,550	\$0	\$5,550
	II. Other Project Costs (Pleas	(a Specify)			. ,		. ,
20	construction materials	е Бресіју)		\$600	\$250		\$850
	contract labor to install materials			\$1,500	\$1,500		\$3,000
21	printed items			\$500	\$0		\$500
22	1			·	·		·
23	production costs			\$875	\$125		\$1,000
24	donated furniture			\$0	\$0	\$750	\$750
25							\$0
26							\$0
27							\$0
28							\$0
29	Subtotal Other Project Costs			\$3,475	\$1,875	\$750	\$6,100
30	TOTAL PROJECT COST			\$3,475	\$7,425	\$750	\$11,650
31	% of Total Project Costs			30%	64%	6%	100%
32							
00	The Request from WCF (cell D30) should be the same as Amount Requested from the Foundation on						
33	the Application Form. The Total Project Cost (cell G30) should be the same as Total Cost of the Project on the Application						
34	Form.	G30) Silouit	a be the s	aine as rotar c	Jost of the Fio	ject on the Ap	pilcation
35							
36							
	On a separate sheet of paper, create a row-by-row budget narrative. Identify the source of cash and in-						
	kind contributions from other organizations as well as the applicant agency's internal support.						
	Explain each project cost. If the project requires a purchase of equipment or supplies, include description and estimated cost of each individual item, the date cost estimates were obtained, and the						
37	source. Also include any other budget explanation which would be helpful to the Foundation.						
38	Call Nancy Sullivan at 757-259-1660 if you have any questions.						
39 40	Call Nancy Sullivan at 757-259-1	oou it you hav	ve any ques	SUONS.			
41	TS\FORMS\SAMPLE_Program Project Bu	rdrad Franciska					3/11/2