

## **Impact Project Budget Worksheet**

Applicant:	<b>Amount Requested:</b>
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**Project Title:** 

Please note: An Impact Grant may <u>not</u> be used to purchase supplies that need to be replaced on a regular basis. For example, an Impact Grant could be used to purchase a new refrigerator and freezer for a food pantry but cannot be used to purchase food items. Or a book vending machine for a school, but not the books within the machine. Those items are considered operational expenses and should become a line item on your projected budget.

**Please list all project costs**, indicating how much of each line item will be funded by this grant and how much will be funded by other sources. The totals at the bottom must match the amounts you provide on your application. Please do not edit the blue TOTAL fields, they contain built-in calculations.

	Funding from	Funding from	PROJECT
LINE ITEMS	this grant	other sources	TOTAL

Staff Salary/wages for this project
Marketing-related expenses
Construction permits/fees
Construction materials
Construction/Installation labor
Equipment

OTHER COSTS/SUPPLIES NOT LISTED ABOVE - please specify each category.

**TOTALS** 

These totals must match the amounts on your application.

Funding from this grant

Funding from other sources

PROJECT TOTAL

Notes about your project budget: