



Detailed Project Budget Information			
EXPENDITURES:		Cost	Amount From COF
Items	Description		
Wages/benefits			
Administration (15%)			
Professional Fees, Honoraria			
Rent/ Utilities/ Telephone			
Equipment / Supplies/Consultants (3 quotes)			
Printing/Photocopying			
Travel			
Publicity/ Promotion/ Distribution			
Production Costs (3 quotes)			
Capital (specify & attach quotes)			
In-kind contribution (e.g. volunteer services)			
Other (specify)			
Other (specify)			
TOTAL:		*	

*The TOTALS in the boxes in bold must match.

REVENUE: Sources of Revenue	Assured	Potential	Total
GOVERNMENT: (specify)			
☐			
☐			
☐			
FOUNDATION: (specify)			
☐			
☐			
☐			
ORGANIZATIONS CONTRIBUTION			
☐ Cash			
☐ In-kind gifts			
☐ Volunteer Services			
OTHER: (specify)			
☐			
☐			
☐			
TOTAL:			*