## **Project Budget Form**

## Organization Name: \_\_\_\_\_

## **Revenue to support project:**

Source of funding	Amount pending <sup>1</sup>	Amount committed <sup>2</sup>
Community Foundation of Greater Lafayette		
Other Funding Sources:		
ie - individual contributions, grants, in-kind support, events		
Total amount needed for total project	1.2.4	~ 10

<sup>1</sup>Amount requested (from any source) but not yet approved <sup>2</sup> Amount confirmed from source

## **Expenses for total project:**

Item	Total amount needed <sup>3</sup>	Amount requested from CFGL <sup>4</sup>
Total expenses for total project		

<sup>3</sup> Full amount needed for each line item <sup>4</sup> Of the total needed for each line item, amount being requested from CFGL