SHUSWAP COMMUNITY FOUNDATION

Grant Application Budget Sheet

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APPLICANT: _____

PROJECT TITLE: _____

DATE: _____

Project Expenses: Equipment & material purchases, contracts, rentals and other cash outlays

Source	Amount
sub total	

Project Revenue:

Internal Funds committed Amount

External Funds committed (other than Shuswap Community Foundation)

Source	Amount
sub total	

In-kind donations value

Source	Amount
sub total	

Amount requested from Shuswap Community Foundation _____