

Project No.: _____

Organization: _____

FOUNDATION-INITIATED (AD HOC) BUDGET FORM

	MeHAF Request		Provided by Other		Provided by Applicant		Total Project Budget	
	Year One	Year Two	Year One	Year Two	Year One	Year Two	Year One	Year Two
INCOME								
Government Grants & Contracts**								
Foundation Funding**								
United Way								
Fees/Earned Income								
Donations								
In-Kind								
Other								
TOTAL INCOME								
EXPENSES								
<i>Personnel</i>								
Wages & Salaries								
Payroll Taxes & Fringe								
Consultants								
<i>Sub-total Personnel</i>								
<i>Direct (Program) Expenses</i>								
Equipment: Purchase								
Equipment: Rental								
Office Supplies								
Program Materials								
Postage & Courier								
Printing & Copying								
Rent								
Telephone & Internet								
Travel: Local								
Travel: Other								
Utilities								
Other: (specify)								
<i>Sub-total Direct Expenses</i>								
<i>Indirect (Organizational) Expenses*</i>								
TOTAL EXPENSES								

* A maximum of 15% of personnel & direct expenses

** Please specify Government Grants & Contracts & Foundation Funding. Add extra lines if necessary.