

HALTON FOUNDATION ("FOUNDATION")

Budget Information Form

Applicant's Name: _____

Applicant year end: _____

Time period for budget below: _____

Amount requested: _____

Time period for payment: _____

Budget Detail

Salaries	\$ _____
Payroll taxes	\$ _____
Fringe benefits	\$ _____
Office space	\$ _____
General overhead	\$ _____
Travel	\$ _____
Consultants/professional fees	\$ _____
Postage	\$ _____
Office supplies	\$ _____
Marketing/communications	\$ _____
Capital expenditures	\$ _____
Total	\$ _____

Budget for Project

Revenue Detail

Individual contributions	\$ _____
Corporate contributions	\$ _____
Foundation grants	\$ _____
Government grants	\$ _____
Membership income	\$ _____
Special events	\$ _____
In-kind support	\$ _____
Other (specify)	\$ _____

Revenue for Project

List other foundations that have been asked to fund this project, the amounts requested, and the current status. Add an additional page if necessary.

Foundation	Amount Requested	Status
_____	\$ _____	_____
_____	\$ _____	_____
_____	\$ _____	_____
_____	\$ _____	_____