

**FINANCES – BUDGET SHEET**

**REVENUE/INCOME 2008**

**REVENUE/INCOME January 1, 2008 – December 31, 2008**

**Call 732-929-4779 if you have questions.**

**YOU MUST USE THIS FORM. NO SUBSTITUTIONS PERMITTED.** Everyone must fill this section out. Every regrantee has income. This is what makes up your match for the grant. **If applicable, explain any deficit or surplus and how either will be remedied in the space below the chart, or on another sheet.**

| <b>INCOME SOURCE</b>   | <b>ACTUAL CASH INCOME</b><br><i>(SP – towards project only;<br/>GOS – total annual income)</i> | <b>ACTUAL IN-KIND</b><br><i>(if applicable)</i> |
|--|--|---|
| <b>Membership Dues</b>   |  |   |
| <b>Admissions – Ticket Sales</b>   |  |   |
| <b>Seminar/Workshop/Class Fees</b>   |  |   |
| <b>Advertising Income</b>  |  |   |
| <b>Other Earned Income</b> <i>(list sources)</i>   |  |   |
| <b>Private Contributions</b>   |  |   |
| <b>Corporate Contributions</b><br><i>(List sources)</i>  |  |   |
| <b>Foundation Contributions</b><br><i>(List sources)</i>   |  |   |
| <b>Government</b><br><i>(* not including this Local Arts Program Grant)</i><br>Indicated if from Local, State, or Federal source |  |   |
| <b>Other:</b> <i>(Identify Source and Amount).</i>   |  |   |
| <b>Award received from this NJSCA/OCC&amp;HC Local Arts Program Grant</b><br><b>(list full award, even if not yet received)</b>  | *  | X   |
| <b>TOTAL</b>   |  | **  |

\* This figure should add up to the entire grant award, even if not yet received.

\*\* This figure should be the same as total in-kind expenses.