

PROPOSED PROGRAM BUDGET

Name of Organization: **House of Agape**

Amount REQUESTED for this Grant: **\$149,000**

(Amount Requested will automatically fill in under **INCOME** in the Foundation line item below):

ENTIRE BUDGET for this Program: **\$149,000**

INSTRUCTIONS: Identify sources of funding and amounts for this request under the appropriate line items below. You must identify funds allocated, committed, or pending for this program through your organization's budget or monies raised from other funding sources. Your program expenses and income should equal your program budget. **EXAMPLE:** If your program budget is \$20,000 then you should show expenses totaling \$20,000 **AND** income totaling \$20,000.

EXPENSES

~**Planned Use of CFMT Funds** - In the first column, indicate the specific line items and amounts where the proposed grant dollars would be used.

~**Funds you are contributing or that you have already secured from others** - In the second column, itemize the other expenses for this program.

The Total Column will add automatically. Use whole numbers only; no characters or symbols.

Expenses	Planned Use of CFMT Funds	Funds COMMITTED or ALLOCATED to this Program	TOTAL
PERSONNEL & SALARIES			
Contracted Services	\$10,000		\$10,000
Professional Fees			\$0
Permanent Staff	\$95,000		\$95,000
PROGRAM			
Program Expenses/Materials	\$5,000		\$5,000
Marketing			\$0
Postage/Mailings			\$0
Printing			\$0
Supplies	\$5,000		\$5,000
TECHNOLOGY/EQUIPMENT			
Equipment	\$15,000		\$15,000
Computer/Computer Peripherals			\$0
Equipment Maintenance/Rental			\$0
OTHER EXPENSES (Specify)			
Facility Rent & Utilities	\$4,000		\$4,000
15 Passenger Van	\$15,000		\$15,000
TOTAL PROGRAM EXPENSES	\$149,000	\$0	\$149,000

INCOME

~**Funds you are contributing or that you have already secured from others** - In the first column, show funds in hand or monies from other sources that would be used to fund this program.

~**Total Pending** - In the second column, show monies yet to be received for this program, including your requested grant amount.

The Total Column will add automatically. Use whole numbers only; no characters or symbols.

Identify Income Sources	Funds COMMITTED or ALLOCATED to this Program	Total Pending	Notification Date
Organizational Budget			
Contributions from Individuals/Businesses			
Government Funding			
Foundations		\$149,000	
Additional Sources			
Community Foundation (This Request)			
SUBTOTAL	\$0		
	TOTAL	\$149,000	