

GRANT BUDGET FORM

THE LORNE AND EVELYN JOHNSON FOUNDATION

Organization:			Grant Letter Date:	
Date (mm/dd/yyyy):				DATE (mm/dd/yyyy) DATE (mm/dd/yyyy)
Additional details may be included in Budget Notes below.	Proposed Project Budget			
REVENUES	Amount	%	Confirmed? If yes, use checkbox.	Revised Budget
The Lorne and Evelyn Johnson Foundation Current GRANT Request		%		
Government Grants				
<i>Subtotal</i>		%		
Other Grants				
<i>Subtotal</i>		%		
Fundraising				
<i>Subtotal</i>		%		
In-Kind				
<i>Subtotal</i>		%		
Other				
<i>Subtotal</i>		%		
TOTAL REVENUES:		%		
EXPENSES	Amount	%		Revised
Salaries/Benefits/Professional Fees				
<i>Subtotal</i>		%		
Program Costs				
<i>Subtotal</i>		%		
Equipment				
<i>Subtotal</i>		%		
Capital/Renovation Costs				
<i>Subtotal</i>		%		
Administration				
<i>Subtotal</i>		%		
Other				
<i>Subtotal</i>		%		
TOTAL EXPENSES:		%		
Balance				

**Revenues must equal expenses with a zero balance

BUDGET NOTES: