

Your Organization Name:				
Your Project Name:				
PROJECT EXPENDITURES			Total Cost	Amount from BCICF
Items	Description			
Wages/Benefits				May be considered
Administration				May be considered
Professional Fees, Honoraria				May be considered
Rent/Utilities/Telephone				
Equipment/Supplies (3 quotes)				
Printing/Photography				
Travel				
Publicity/Promotion/Distribution				
Volunteers				
Other (specify)				
<b>TOTAL:</b>				

Please make sure your total amount asked for from BCICF matches your online form submission total.  
 Balance your total project budget ~ expenditures total = expenses total.

PROJECT REVENUE		Assured	Potential	Total
Organization Name	Type of Contribution	\$	\$	\$
<b>Your Organization's Contribution</b>	Cash			
	In-Kind Gifts			
	Volunteer Services			
	Other			
<b>BC Interior Community Foundation</b>	Community Project Grant	N/A		
<b>Other (ie: Government Grant, Foundations, Municipal, Private Donor, Fundraising Campaign, etc)</b>				
<b>TOTAL ALL COLUMNS:</b>				

