

Organization Name:

Program Name

*These figures are specific to the program, and would not be incurred if the program were discontinued or may increase if the program grows.

| Income | Past Year | % | Current Year | % | Next Year | % |
|--------------------------------------|-----------|---|--------------|---|-----------|---|
| | 2010 | | 2011 | | 2012 | |
| | Actual | | Budget | | Projected | |
| 1. Individual/Corp. Contributions | | | | | | |
| 2. Grants (attach detail) | | | | | | |
| 3. Membership Dues | | | | | | |
| 4. Program Fees, Income | | | | | | |
| 5. Agency Fund Raising | | | | | | |
| 6. Investment Income | | | | | | |
| 7. W.C. United Fund Allocation | | | | | | |
| 8. Government Grants | | | | | | |
| 9. Materials Sales | | | | | | |
| 10. Restricted Gifts & Contributions | | | | | | |
| 11. Miscellaneous Income | | | | | | |
| (attach detail) | | | | | | |
| TOTAL INCOME | | | | | | |

Expenses

| | | | | | | |
|-----------------------------------|--|--|--|--|--|--|
| 1. Salaries | | | | | | |
| 2. Employee Benefits | | | | | | |
| 3. Employee Taxes | | | | | | |
| 4. Professional Fees | | | | | | |
| 5. Office Supplies | | | | | | |
| 6. Utilities | | | | | | |
| 7. Postage/Shipping | | | | | | |
| 8. Rent | | | | | | |
| 9. Travel | | | | | | |
| 10. Training/Education | | | | | | |
| 11. Equipment | | | | | | |
| 12. Insurance | | | | | | |
| 13. Depreciation | | | | | | |
| 14. Awards and Grants Given | | | | | | |
| 15. Miscellaneous (attach detail) | | | | | | |
| TOTAL EXPENSES | | | | | | |

| | | | | | | |
|--------------------------|--|--|--|--|--|--|
| NET | | | | | | |
| # of people/units served | | | | | | |
| Cost per person/unit | | | | | | |