Reset Form

Project Expenses

Applicant: ______________________ Project Name: ______________________

How to fill out the columns:

- **Category:** choose the kind of expense from the drop down menu (In-kind for non-profits only)
- **Expense Item:** enter the expense item name
- **Total Cost:** enter the total cost of the item
- **Item Details/Cost Breakdown:** provide details/breakdown of cost

Category	Expense Item	Total Cost	Item Details/Cost Breakdown
	Project Expense Total	$ 0.00	

Revenue and Contributions

Applicant: _____ Project Name: _____

List all sources of income for your project below. If a source of funding is designated for a specific expense clearly indicate this in the notes section (i.e. a grant to pay for registration fees, travel funding, etc.)

Estimated product sales, ticket sales, or other projected revenues resulting from your project delivery cannot be used towards project financing. Enter this information in the separate section at the bottom of the page.

For Creative Businesses/Touring Non-Profits: The Requested CIF Contribution cannot exceed 50% of your eligible Project Expense Total on page 1. Clearly indicate how the remaining 50% or more of your project costs are being financed by listing your revenue sources below.

Category	Revenue Source	Confirmed	Pending	Total	Notes
		❑	❑		
		❑	❑		
		❑	❑		
		❑	❑		
		❑	❑		
		❑	❑		
		❑	❑		
		❑	❑		
		❑	❑		
		❑	❑		
		❑	❑		
		❑	❑		
	Requested CIF Contribution		❑		
			Total Project Revenue	$ 0.00	

Estimated Project Revenue Information (Optional)

List what revenues you expect to generate as part of the project to demonstrate the overall value of the project.

Revenue Source	Description	Estimated Revenue	Notes
	Total Estimated Revenue Generated	$ 0.00	