

# Annual Grant Budget Form

## Nonprofit Organization Name

Enter organization name

Project Title

Enter project title

Grant Period

e.g. Jan 2024 - Dec 2024

Prepared by

Name

Date

MM/DD/YYYY

## Budget Summary

Budget Category	Grant Funds Requested	Other Funding	Total
Personnel			
Fringe Benefits			
Travel			
Equipment			
Supplies			
Contractual			
Other			
Total			

## Budget Justification

Provide explanation for each line item and how the funds will be used...

## Authorized Signature

Name & Title

Name & Title

Date

MM/DD/YYYY