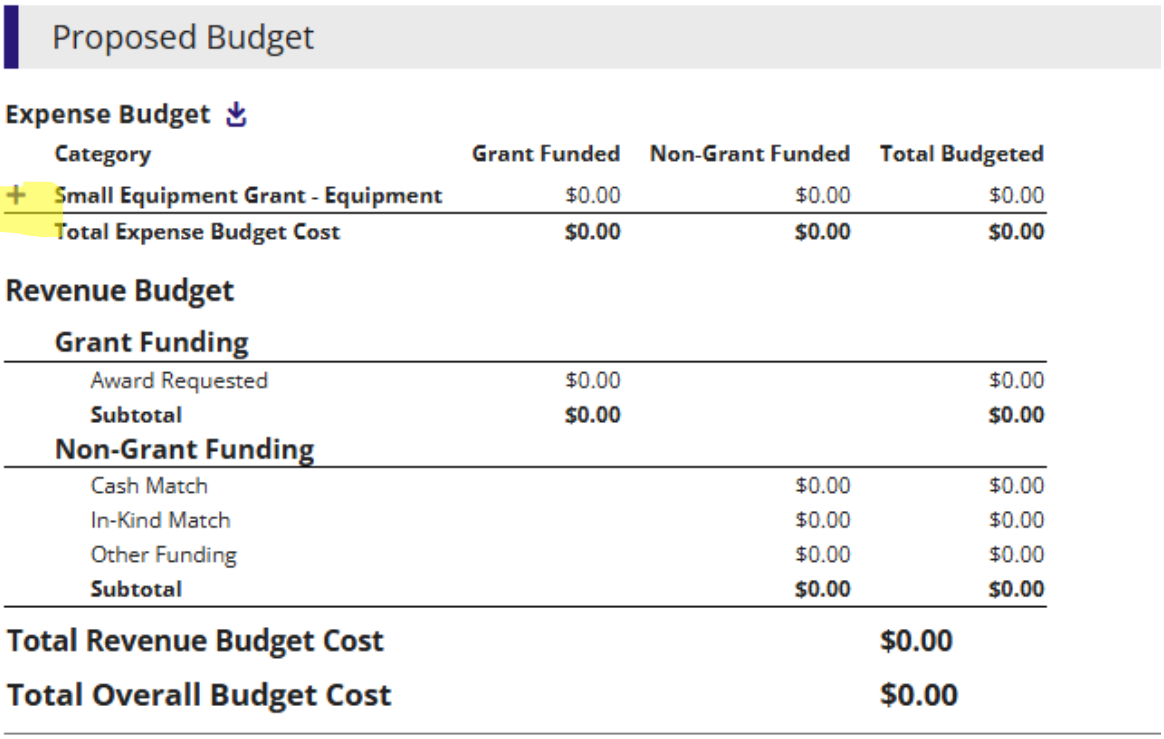
How to fill out the proposed budget

Click the + sign



Proposed Budget

Expense Budget

	Category	Grant Funded	Non-Grant Funded	Total Budgeted
+	**Small Equipment Grant - Equipment**	$0.00	$0.00	$0.00
	Total Expense Budget Cost	**$0.00**	**$0.00**	**$0.00**

Revenue Budget

Grant Funding			
Award Requested	$0.00		$0.00
Subtotal	**$0.00**		**$0.00**
Non-Grant Funding			
Cash Match		$0.00	$0.00
In-Kind Match		$0.00	$0.00
Other Funding		$0.00	$0.00
Subtotal		**$0.00**	**$0.00**

Total Revenue Budget Cost **$0.00**

Total Overall Budget Cost **$0.00**

Enter the following information:

Name: Small Equipment Grant

Description: See Small Equipment Grant Application

Amount: Enter amount being requested

Click “Save”

