

Instructions:

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|---------------------------------------|------|---------|-------|
| Organization/Project Name: | | | |
| INCOME | | | |
| | CASH | IN-KIND | TOTAL |
| Earned Income | | | |
| Admissions/Ticket Sales | | | |
| Contracted Services (workshops, etc.) | | | |
| Concessions | | | |
| Contributed Support | | | |
| Foundations | | | |
| Corporate | | | |
| Individuals | | | |
| Government Support | | | |
| Federal | | | |
| City/Parish | | | |
| State | | | |
| LPG Grant Award | | | |
| TOTAL PROJECT INCOME | | | |

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Organization/Project Name:				
EXPENSES				
	GRANT	CASH	IN-KIND	TOTAL
Personnel **should match Provider of Service info.				
Administrative				
Artistic				
Technical/Production				
Fiscal Agent Fees				
Other Project Related Costs				
Office/Space Rental				
Utilities (cost directly related to project)				
Supplies and materials				
Production Costs				
Equipment Rental				
Marketing and Promotion				
Postage/shipping				
Insurance (cost directly related to project)				
Travel				
TOTAL PROJECT EXPENSES				

****Please keep in mind that a 50% CASH MATCH is required.**