

Organization: _____

Copy of the Budget forecast

Your fiscal year ends (date) : ____/____/____/

	Budget forecast _____
Income:	
Government subsidies (please specify):	
Municipality:	
Donations or sponsorships:	
Contributions of participants:	
Fundraising:	
Other (please specify):	
TOTAL INCOME:	- \$
Expenditures:	
Activities (please specify)	
Equipment:	
Salary and deductions:	
Operating costs (supplies, rent, etc.), please specify:	
Insurance:	
Travel expenses:	
Other (please specify):	
TOTAL EXPENDITURES:	- \$
TOTAL income or (loss):	- \$

Signature (+title): _____
