

Project Operating Budget Form

Project Title: _____

Applicant: _____

Budget Categories	Project Cost Estimates	Sources of Funds									
		CDBG Funds		Applicant's Funds		1.		2.		3.	
		Amount	Status*	Amount	Status*	Amount	Status*	Amount	Status*	Amount	Status*
Administration											
Communication											
Tools and equipment											
Furnishings											
Travel and Transportation											
Insurance											
Maintenance and supplies											
Professional services											
Rent											
Security											
Staff Costs											
Employee Benefit Costs											
Utilities and fuels											
Other _____											
Other _____											
Other _____											
Other: _____											
SOURCE TOTAL											

TOTAL PROJECT COST

*C=Committed Funds; P=Funds that have been applied for & decision is pending; N=Funds that have not yet been requested.