

REVISED PROJECT & BUDGET - SMAHC LOCAL ARTS DEVELOPMENT GRANTS

PLEASE TYPE OR WRITE LEGIBLY

REVISED BUDGET

ORGANIZATION: _____ **GRANT #:** _____

PROJECT: _____

Part B - PROJECT BUDGET: Clearly identify each item. Show method of calculations (hours, rate, number of people, etc.).
Round to the nearest dollar. Detail expenses.

COST OF PROJECT **CASH COST**

List line items and budgeted amounts below

1.	\$
2.	\$
3.	\$
4.	\$
5.	\$
6.	\$
7. TOTAL COST OF PROJECT – Add Lines 1 through 6.	\$

MATCH FOR PROJECT

8. Organization Funds Budgeted for Project	\$
9. Other Resources (Indicate Source & amounts)	\$
10. Total Income (Add lines 8 through 9)	\$
11. Actual SMAHC Grant Award	\$
12. Total Match for Project (line 11 + line 12)	\$

**REVISED GRANT BUDGET AND PROJECT FORM
SMAHC LOCAL ARTS DEVELOPMENT GRANTS**

Describe how budget changes will affect the project. (What will be changed?) Will there be any changes in personnel, time, scope, etc.?

How will the revised budget affect the number of participants?

How will the revised budget affect the impact of the project?

If other sources will replace funding, please indicate amount and source.

SIGNATURE, GRANT AUTHORIZING OFFICIAL

DATE

SIGNATURE, GRANT PROJECT DIRECTOR

DATE