

INTERIM FUNDING APPLICATION

BUDGET INFORMATION

Applicant Organization

Round all amounts to the nearest dollar.

Project Title

EXPENSES	Cash Expenses	In-Kind Contributions
A. Personnel Administrative (Number of Positions <input type="text"/>)		
Artistic (Number of Positions <input type="text"/>)		
Outside Artistic Fees and Services		
Other Outside Fees and Services		
B. Space Rental		
C. Travel (Mileage, Lodging, Meals)		
D. Marketing		
E. Remaining Operating Expenses		

F. Total Cash Expenses (A through E)		
G. Total In-Kind Contributions (A through E)		
H. Total Expenses (Total of F and G)		

INCOME	Income
I. Admissions	
J. Contracted Services Revenue	
K. Other Revenue (Please specify) _____	
L. Cash Support Corporate _____ Foundation _____ Other Private _____	
M. Government Support City/County _____ Regional/State _____ Federal _____ Other SDAC Grant(s) _____	
N. Applicant Cash	
O. Total Application Cash Income (I through N)	
P. Grant Amount Requested from SDAC (No more than 50% of Total Cash Expenses from F above)	
Q. Total Cash Income (O and P)	
R. Total In-Kind Contributions (Same as G above)	
S. Total All Income (Total of Q and R should equal H above)	