

## Washington AIDS Partnership Budget and Financial Statement Guidelines

**Revenue Categories:** For each category, list specific amounts requested from foundations, corporations, and other funding sources for this proposal, as well as the status of those requests (pending or committed). For pending requests, please indicate the date you expect notification.

1. Grants Contract
  - a. Local/State/Federal Governments (please list source(s))
  - b. Foundations
  - c. Corporations
  - d. United Way/Combined Federal Campaign and other federated campaigns
  - e. Individual donors
  - f. Other (specify)
2. Earned Revenue
  - a. Events
  - b. Publications and Products
  - c. Fees
  - d. Other (specify)
3. Membership Income
4. In-Kind Support (donated goods, services, equipment, non-cash items, volunteer hours)
5. Other (specify)
6. Total Revenue

**Expense categories:** Include the total amount for each category relevant to your organization or project. Skip categories where you have no expenses. Please show two columns – one listing the total expense and one listing the specific costs requested in this grant application.

1. Salaries (total salary budget, number of positions, and whether full- or part-time)
2. Payroll Taxes
3. Fringe Benefits
4. Consultants and Professional Fees (itemize type(s) of consultant(s) and fees)
5. Travel
6. Equipment
7. Supplies
8. Printing and Copying
9. Telephone and Fax
10. Postage and Delivery
11. Rent and Utilities
12. Maintenance
13. Technology (if budgeted separately – specify hardware/software spending, maintenance, training)
14. Evaluation
15. Other (specify)
16. Total Expenses