

Project Budget Summary

NAME OF ORGANIZATION:

ORGANIZATION'S MISSION STATEMENT OR GOALS/VALUES:

	MONTH												
	1	2	3	4	5	6	7	8	9	10	11	12	
REVENUES													
EXPENSES													
NET PROFIT													
Personnel Salaries													
Benefits													
Equipment Costs													
Travel Costs													
Printing/Marketing													
Advertising Costs													
Insurance Salaries													
Insurance Health													
Rent													
Utilities													
Supplies													
Travel & Mileage													
Travel													
Travel Fuel													
Travel Mile													
Travel Lodging													
Travel Meals													
Travel Other													
Travel Insurance													
Travel Car													
Travel Air													
Travel Rail													
Travel Bus													
Travel Ferry													
Travel Boat													
Travel Plane													
Travel Ship													
Travel Train													
Travel Truck													
Travel Van													
Travel Carpool													
Travel Other													
TOTAL REVENUES													
TOTAL EXPENSES													
NET PROFIT													

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