

Organization Name: _____

Program Name: _____



PROGRAM BUDGET REPORT FORM

Line No.	SECTION 1	Program Funding Received From All Sources FY 2024/2025	Proposed Program Funding Received From All Sources FY 2025/2026
	Program SUPPORT/REVENUE		
1	United Way of Cumberland County		
2	Other United Ways		
3	Youth Growth Stock Trust		
4	Grants - City/County		
5	Grants - Federal/State		
6	Other Grants		
7	Foundations		
8	Contributions		
9	Fundraising/Special Events		
10	Program Service Fees		
11	Sale of Materials		
12	In-Kind Support		
13	Total Support/Revenue		

Organization Name: _____

Program Name: _____



Line No	SECTION 2	All Program Expenses Supported by ALL Sources	All Program Expenses Supported by YGST Funding
	Program EXPENSES	FY 2024/2025	FY 2025/2026
14	Salaries		
15	Employee Benefits		
16	Payroll Taxes		
17	Telephone		
18	Postage & Shipping		
19	Utilities		
20	Program Related marketing		
21	Travel		
22	Conferences, Meetings, etc		
23	Assistance to Individuals		
24	Awards & Grants		
25	Total Expenses		
26	Excess of Revenues over Expenses		