Organization Name

BUDGET
Fiscal Year 7/1/20__ - 6/30/20__

1 Beginning balance 7/1 (all accounts & funds) _____

Projected Revenue: (list sources)

2 Total Revenue _____

3 Total Available Funds **(Add lines 1 and 2)** _____

Projected Expenses: (list)

4 Total Expenses _____

5 Ending Balance **(Line 3 minus Line 4)** _____

Submitted by: _____ Date: _____

Organization Name

Income / Expense Statement
Fiscal Year 7/1/20__ - 6/30/20__

Bank & Account Number

1 Beginning balance (7/1) checking acct: _____ _____

2 Beginning balance (7/1) other account: _____ _____

3 Cash on hand (7/1) _____

Gross Receipts: (list sources)

4 _____ _____

5 _____ _____

6 _____ _____

7 _____ _____

8 _____ _____

9 _____ _____

10 _____ _____

11 _____ _____

12 _____ _____

13 _____ _____

14 _____ _____

15 Total Receipts **(Add lines 4 to 14)** _____

16 Total Available Funds **(Add lines 1+2+3+15)** _____

Expenses: (list)

17 _____ _____

18 _____ _____

19 _____ _____

20 _____ _____

21 _____ _____

22 _____ _____

23 _____ _____

24 _____ _____

25 _____ _____

26 _____ _____

27 _____ _____

28 Total Expenses **(Add lines 17 to 27)** _____

29 Ending Balance **(Line 16 minus Line 28)** _____

Line 29 should equal Line 34:

30 Ending balance (6/30) checking account: _____

31 Ending balance (6/30) other account: _____

32 Cash on hand (6/30): _____

33 Less: total all outstanding checks _____

34 **(Add lines 30+31+32)-(Subract line 33)** Total _____

Submitted by: _____ Date: _____