



# MINISTRY PROPOSED BUDGET SUMMARY

Please attach all of the *Ministry Proposed Activity Forms* associated with this budget summary.

Ministry Name: \_\_\_\_\_

Ministry Account # \_\_\_\_\_

Ministry Leader: \_\_\_\_\_

Ministry Leader's Daytime Phone # \_\_\_\_\_

Ministry Staff Advisor: \_\_\_\_\_

Staff Advisor Signature of Approval: \_\_\_\_\_

## BUDGET SUMMARY TOTALS

Please break down the total cost by identifying each individual category and the amount.

Ministry Activity Number	Name of Ministry Activity	Total Cost	Total Anticipated Revenue <i>(Ticket sales, etc.)</i>	Net Budget Request <i>(Cost minus Revenue)</i>
1		-	=	
2		-	=	
3		-	=	
4		-	=	
5		-	=	
6		-	=	
7		-	=	
8		-	=	
9		-	=	
10		-	=	
11		-	=	
12		-	=	
13		-	=	
14		-	=	
15		-	=	
<b>A. Total Fiscal Year Proposed Expenses</b>		-	=	
<b>B. Total Fiscal Year Approved Budget</b>		-	=	
<b>C. Difference (A – B = C)</b>		-	=	