New Hampshire State Council on the Arts American Rescue Plan BUDGET FORM

Show how you plan to spend the requested NHSCA American Rescue Plan funds.

Your budget should include only costs that were incurred from August 23, 2021 – November 30, 2022 that you want the grant to cover.

Budget items should be limited to the four options in the form. You may request up to \$6,000. No match is required.

Please do not use symbols such as dollar signs (\$) or commas - their use will cause your budget to not total correctly.

APPLICANT NAME (Please use the name you used on the application):
REQUESTED NHSCA GRANT SUPPORT:

	Amount Cash	Notes		
A. SALARY SUPPORT - list employee job position(s) below				
Total				
B. FEES FOR ARTISTS/CONTRACTUAL PERSONNEL - list fees for artists and contractual personnel below				
Total				
C. FACILITIES COSTS - list rent, utilities, insurance, PPE, cleaning supplies, etc. costs below				
Total				
D. MARKETING/PROMOTION COSTS - list below				
Total				
TOTAL CASH EXPENSES				
Please use this space for additional budget notes not included above.				