

New Hampshire State Council on the Arts

NH CARES BUDGET FORM

Show how you plan to spend the requested NH CARES funds.

Your budget should include only costs that will be incurred from March 13, 2020 - September 30, 2020 that you want the grant to cover.

Budget items should be limited to the three options in the form. 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:

Items will automatically add.	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, etc. costs below		
Total	-	
TOTAL CASH EXPENSES	-	

Please use this space for additional budget notes not included above.