

**New Hampshire State Council on the Arts  
Budget Form  
Artist Entrepreneurial Grants**

**Minimum/Maximum grant requests are \$250 - \$2,500. No cash match is required for FY2025.**

Your budget must be balanced - total project income must equal total project expenses.

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) ^^

**Project Income**

List the names of all income sources for this application, both secured and anticipated.	Dollar amount for all income for this project.
NHSCA Grant Request	
Corporate sponsorships/private foundations ( <i>identify</i> ):	
Other support ( <i>includes scholarships/fellowships</i> ):	
Other government support ( <i>identify</i> ):	
<a href="#">Applicant cash (please click for definition)</a>	
<b>Total Project Income (Must Equal Total Project Expenses)</b>	

**Project Expenses**

List all expense items related to your application. Be as specific as possible. Examples include artist/contractor fees, printing, postage, room rentals, etc.	Amount of the item expense the grant funding will cover	Amount of the item expense other income will cover	Total Item Expense (this column will add by itself)
Supplies and materials			
Registration or entry fees			
Contracted services			
Equipment			
Printing			
Space rental ( <i>location/rate</i> ):			
Travel ( <i>specify mileage, per diems, expenses</i> )			
In-state:			
Out-of-state:			
Marketing/publicity ( <i>specify</i> ):			
Remaining project expenses ( <i>please itemize</i> ):			
<b>Total Project Expenses Must Equal Total Project Income (this row will add by itself)</b>			