



## Vt. Governor's Council on Physical Fitness and Sports Budget Request Form

Council Member(s) making request: \_\_\_\_\_

Council Committee \_\_\_\_\_

Project or Program: \_\_\_\_\_

For Fiscal Year \_\_\_\_\_

Date Submitted: \_\_\_\_\_

How does this program/project fit with the Council's mission (or, in other words, what is the justification for this program/project being part of the Council budget)?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### Budget Line Items:

Income:	Amount
Donations	
Registration fees	
Sales (T-shirts, caps, etc.)	
Other:	
<b>Total Projected Income</b>	
Expenses: Please list by category	
<b>Total Projected Expenses</b>	
<b>Net Inflow (Outflow)</b>	

Submit completed form and any attachments to the Marjorie Bowin, Treasurer, 293 Juniper Ridge, Shelburne, VT 05482-6756 on or before April 1 for the next fiscal year.