

**PRACTICE**

**Funding Budget**

**Enter your FY here:**

	Total Agency	Fines & Fees	Grant A	Grant B	Grant C	Grant D	County
<b>Expenditures</b>							
Salaries							
Fringe							
Insurance							
Rent							
Supplies							
Taxes							
Telephone							
Training							
Travel							
Utilities							
Client Services							
Total Expenditures	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -