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| TOTAL PROGRAM BUDGET WORKSHEET | | | |
| **COMPLETE FORM FOR EACH PROGRAM FOR WHICH YOU ARE SEEKING FUNDING**  **Program budget should reflect Hays & Caldwell Counties only.**  **You may pro-rate overall income & expenses, if you do not account by County.** | | | |
| **Line Items** | **Last Year** | **Current Year** | **Next (Grant)**  **Year** |
| **INCOME:** |  |  |
| **(Please list income by the appropriate line items for the program for which you are seeking funding)** | | | |
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| **TOTAL INCOME** |  |  |  |
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| **EXPENSES:** |  |  |  |
| **(Please list expenses by the appropriate line items for the program for which you are seeking funding)** | | | |
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| **TOTAL EXPENSES** |  |  |  |
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| **Deficit / Surplus** |  |  |  |