*The following information may be submitted using the form below or you may create your own document.*

**BUDGET INFORMATION**

Please itemize the planned expenditures of the entire project including sales tax and costs beyond the scope of this grant. Indicate which aspects of the project is specific to your request from the Issaquah Schools Foundation.

|  |  |  |  |
| --- | --- | --- | --- |
| Item Description | Quantity | Unit Cost | Subtotal |
|  |  | $ | $ |
|  |  | $ | $ |
|  |  | $ | $ |
|  |  | $ | $ |
|  |  | $ | $ |

Overall Total $ \_\_\_\_\_\_\_\_\_\_\_\_

Further Explanation if necessary: