

3. Please include an itemized project budget:

Income: <i>List your income sources</i>	
1. This Grant Request:	\$
2.	\$
3.	\$
4.	\$
5.	\$
6.	\$
Total Income:	\$
Expense: <i>List your expenses</i>	
1.	\$
2.	\$
3.	\$
4.	\$
5.	\$
6.	\$
Total Expenses	\$
Net: Your income less your expenses should add up to ZERO!	\$ This number = (total income – total expenses)

Please submit one copy of your application.

You may submit your application in any of the following ways:

1. Email your application to: semeier@cfjacksonhole.org
2. Fax your application to: 734-2841
3. Mail your application to: PO Box 574, Jackson WY 83001
4. Bring your application to our office: 255 East Simpson, Jackson Wyoming

If you have questions or need help in any way, please contact:

Susan Eriksen-Meier, Program Officer
 739-1026 extension 103
 semeier@cfjacksonhole.org