



Annual Budget Submission For the Year 2017-2018

Date:

| | | |
|---|--|--|
| Organization Name Approximate # students: | | |
| Advisor-Coach Name Parent Representative: | | |
| Contact e-mails: | | |
| Contact Phone Numbers: | | |

Predicted Revenue other than from Oriole Nation (this may only apply to a few)

| Month | Fund Raiser - Revenue Source | Est. Revenue |
|--------------------------------|------------------------------|--------------|
| | | |
| | | |
| | | |
| | | |
| Total Estimated Revenue | | |

Oriole Nation Funding request

| Month | Description / Purpose | Estimated Costs | *Paid by Other Source | ON Request |
|---------------|-----------------------|-----------------|-----------------------|------------|
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| Totals | | | | |

NOTES

*This money may come from student contribution, entrance/ticket fees, current activity accounts, etc.

Please break down the costs for events between registration, transportation and other costs. Also include notes regarding the participant's financial responsibility and how many students will be involved in each event.

ON understands these are estimates - if you do not use the allocated amount approved by Oriole Nation, those monies go to support our entire group!!

If you have additional request through out the year - **a representative MUST attend the ON meeting and explain the request.**

We need adult leadership and attendance at ON meetings! Please make sure to have a representative for each group that is requesting Oriole Nation funds - If there is not a representative, no funds will be distributed!