#  GREENE COUNTY MASTER GARDENER VOLUNTEER BUDGET REQUEST FORM

 **Date: \_\_\_\_\_\_\_\_\_\_\_\_\_**

**Project/Committee Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**Name Committee Chair / Project Leader Phone Number Email Address**

**New\_\_\_ Existing \_\_\_**

Was the previous year’s budget spent in full? Yes \_\_\_ No \_\_\_ (If no, please explain in box.)

Amount requested for upcoming year $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_

If budget has increased, what are you planning to use the increase it for?

Is there any additional funding? Yes \_\_\_ No \_\_\_ (If yes, please explain in box.)

Project/Committee Annual Report

Project Accomplishments (This includes education programs at the project, partnerships with other organizations, or community members that volunteer at the project):

You foresee a large expenditure in the future, estimated date, and amount?

Project Enhancement Needs: