



Massachusetts Bar Foundation

2010/2011 IOLTA Grants Program

Proposed Budget 9/1/10 - 8/31/11

Organization Name: _____
 Program Name: _____
 Grant Period: Sept. 1, 2010 - Aug. 31, 2011
 Fiscal Year: From: _____ To: _____

PERSONNEL	<i>Total</i>	<i>&</i>	<i>Total</i>	<i>% of Time</i>	<i>Total</i>	<i>Amount</i>	<i>2009/2010</i>
<i>Job Title</i>	<i>Salary (FTE)</i>		<i>Benefits</i>	<i>X Allocated to Program</i>	<i>= Program Budget</i>	<i>Requested from MBF</i>	<i>MBF Grant Award*</i>
_____	_____		_____	_____	_____	_____	_____
_____	_____		_____	_____	_____	_____	_____
_____	_____		_____	_____	_____	_____	_____
_____	_____		_____	_____	_____	_____	_____
_____	_____		_____	_____	_____	_____	_____
_____	_____		_____	_____	_____	_____	_____
_____	_____		_____	_____	_____	_____	_____
				Total Personnel:	_____	_____	_____
NON-PERSONNEL							
Attorney Fees					_____	_____	_____
Other Consultants and Professional Fees (Incl. Audit)					_____	_____	_____
Insurance					_____	_____	_____
Equipment					_____	_____	_____
Supplies					_____	_____	_____
Printing and Copying					_____	_____	_____
Telephone, Fax, Internet					_____	_____	_____
Postage and Delivery					_____	_____	_____
Training					_____	_____	_____
Other (Please Specify)					_____	_____	_____
				Total Non-Personnel:	_____	_____	_____
				TOTAL EXPENSES	_____	_____	_____

If total program budget is more than approved MBF funding, please detail additional program revenue sources below. Please indicate whether funding is **pending** or **secured**.

<u>Source</u>	<u>Status</u>	<u>Amount</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

* If the program received MBF funding in the 2009/2010 grant year, please provide approved budget here.