

 **BUDGET FORM**

**County 76 Advanced Master Gardener Training**

Topic \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

County\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date(s)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Training Location: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Minimum number of Participants: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Using the minimum number of participants to make the class, develop a budget with a cost per person to cover all expenses. All expenses will be paid through the hosting county office.

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| **EXPENSES** |
| Cost of Facilities | $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Speaker(s) Expense (including allowable mileage expense) | $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Honorarium (not to exceed $100.00) | $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Rentals (tables, chairs, etc.) | $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Food (include food cost, utensils, delivery, tax, gratuity not more than 15%) | $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Copies, Materials, Postage, etc. | $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Other(s): | $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Total Expenses** | $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Expenses divided by Minimum Number of Participants = Cost per participant |    |
| **Cost per Participant (usually a rounded number)** | $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of County Agent Date

To ensure Advanced Training is available to all Master Gardeners, the announcement will be sent from the State Extension Office. Please send this form along with proposal form to

Arkansas Master Gardener Advanced Training

Attn: Julie Treat

2301 South University Avenue

Little Rock AR 72204 Or: jtreat@uada.edu

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