



BUDGET FORM

(NON- ANNUAL CONFERENCE PROGRAMS)

CONNECTICUT LIBRARY ASSOCIATION

P. O. Box 75 Middletown, CT 06457 Phone: (860) 346-2444 Fax: (860) 344-9199

YEAR OF 2010-2011

COMMITTEE/SECTION: \_\_\_\_\_ DATE: \_\_\_\_\_

INCOME			
LINE-ITEM	ESTIMATE	ACTUAL	TO CLA OFFICE
<b>Number of expected attendees:</b>			CASH:
<b>Registration fees:</b>			\$
Member:			
Non-member			CHECK:
others			\$
<b>Donations:</b>			
<b>Other Income:</b>			OTHER:
<b>TOTAL INCOME:</b>			
EXPENSES			
LINE-ITEM	REQUESTED BUDGET	APPROVED BUDGET	ACTUAL
<b>Professional fees &amp; services:</b>			
Honorariums			
Travel			
Meal			
Others			
<b>Program related expenses:</b>			
<b>Contracted services:</b>			
*Catering, refreshments			
<b>Others:</b>			
<b>TOTAL EXPENSES:</b>			
<b>GRAND TOTAL:</b>			

Additional Information: please indicate if deposit for catering is needed \$ \_\_\_\_\_

Chair person's signature: \_\_\_\_\_ Printed Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

**RETURN THIS FORM TO CLA TREASURER: Alison Wang**  
 Phone: (203) 575-8250 Fax: (203) 575-8250 [awang@nvcc.comnet.edu](mailto:awang@nvcc.comnet.edu)