

NEW YORK STATE EDUCATION DEPARTMENT
Summer Food Service Program

Budget Revision Form

Sponsor Name: _____ Date: _____

ADMINISTRATIVE AND OPERATIONAL BUDGET

A. Estimated Administrative Cost (SFSP only)		B. Estimated Operational Costs (Food Service)	
Item	Sponsor Amount	Item	Sponsor Amount
Total Administrative Salaries		Food	
Office Space Rental (Attach Contract)		Labor	
		Site	
		Kitchen	
Utilities		Non-Food Supplies	
Telephone		Utilities	
Office Supplies		Kitchen or Truck Rental (Attach Contract)	
Audit Fees (Attach Letter)		Equipment Rental (Attach Contract)	
Transportation (Administrative & Monitors)	Rental	Transportation - Food	
	Mileage		
Postage		Transportation - Children	
Legal Fees		Other (specify)	
Other (Specify)			
Total		Total	

Prepared by _____ Date _____

SED Approval _____ Date _____