

ARTICLE VI  
**PROJECT SUMMARY**  
 SUFFOLK COUNTY  
 Department of Economic Development & Planning  
 Cultural Arts and Film/Media Grant Funding

Applicant: \_\_\_\_\_ F.I.D. \_\_\_\_\_

Street Address (REQUIRED): \_\_\_\_\_ Award Amount:  
 Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Mailing Address (IF Different): \_\_\_\_\_  
 Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code \_\_\_\_\_

Contact Person: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Project Name: \_\_\_\_\_

Description of Project: (Please make sure this Cultural Tourism project reflects project description as awarded)

**Detailed Budget**

<u>Budget Line</u>	<u>Quantity</u>	<u>Total</u>
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**Program Staff**

Staff 1:		
Staff 2:		
Staff 3:		
Staff 4:		
	Sub Total	

**Contracted Services**

Artistic Personnel:		
Technical Personnel:		
Marketing:		
Other		
	Sub Total	

**Equipment**

Item 1:		
Item 2:		
Item 3:		
Item 4:		
	Sub Total	

**Supplies**

Item 1:		
Item 2:		
Item 3:		
Item 4:		
	Sub Total	

Total must equal grant award, not the grant request. Total

*All change requests must be approved by EDP Staff.*

