

FFEA MIDDLE SCHOOL YEARLY BUDGET FORM

School Year _____ -- _____

School Name _____ County _____

Advisor's Name _____

<u>Month of Activity</u>	<u>Name of Activity</u>	<u>Chairperson's Name</u>	<u>Goal of Activity</u>

<u>Name of Activity</u>	<u>Expected Cost</u>	<u>Expected Income</u>	<u>Profit</u>
<u>TOTAL</u>			