

# Wake County Quality Supplements Budget Checklist



| Items for Review   | Yes | No | Comments/Suggestions |
|--|-----|----|----------------------|
| Budget includes identifying information<br><i>(Ex. Program Name and/or License Number)</i>                             |     |    |                      |
| Budget specifies time period covered<br><i>(Ex. Jan-Dec 2017 or July-June 2017)</i>                                    |     |    |                      |
| Budget Includes detailed expense categories<br><i>(Ex. salaries, rent, supplies, utilities, taxes, insurance, etc)</i> |     |    |                      |
| Budget includes detailed income categories<br><i>(Ex. Tuition, Subsidy Income, Food Program, Fees)</i>                 |     |    |                      |
| Budget includes calculations for total income, expenses and profit/(loss)  |     |    |                      |
| Basic review of calculations show that they are correct<br><i>(Ex. No unrealistic deficits or profits)</i>             |     |    |                      |
| Information gathered supports that budgeting is an on-going practice for the program                                   |     |    |                      |
| Other (specify in comments/suggestions)  |     |    |                      |

**For budget templates, please see the following websites:**

<http://www.firstchildrensfinance.org/businessresourcecenter/centers-2/finance/finance-tools/>

[http://www.redleafpress.org/Assets/ClientDocs/sample\\_chapters/BudgetForm.xls](http://www.redleafpress.org/Assets/ClientDocs/sample_chapters/BudgetForm.xls)