

# Wake County Quality Supplements Budget Checklist



Facility Name: \_\_\_\_\_

License ID: \_\_\_\_\_

Items for Review	Yes	No	Comments/Suggestions
Budget includes identifying information <i>(Ex. Program Name and/or License Number)</i>			
Budget specifies time period covered <i>(Ex. Jan-Dec 2018 or July 2018-June 2019)</i>			
Budget Includes detailed expense categories <i>(Ex. salaries, rent, supplies, utilities, taxes, insurance, etc)</i>			
Budget includes detailed income categories <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 <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)