

# Volunteer Day Camp Budget Worksheet

Service Unit(s): \_\_\_\_\_ Day Camp ID#: \_\_\_\_\_

Dates of Day Camp: \_\_\_\_\_

Camp Director: \_\_\_\_\_ Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

Business Manager: \_\_\_\_\_ Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

Estimated Income:	Participants	# of Participants	Fee	Total
	Girl Scouts			\$
	Girl Scouts of Volunteers			\$
	Adults			\$
	Program Aides			\$
	Pixies or Tags			\$
	Others (t-shirt, patch, etc.)			\$
	Others (optional activity fee, etc.)			\$

**TOTAL**

Estimated Expenses:	Description	Number	Cost	Total Expense
	Consultants		\$	\$
	Food		\$	\$
	Office Supplies		\$	\$
	Volunteer Recognition		\$	\$
	Program Supplies (200 girls x 5 days = #)		\$	\$
	Patches		\$	\$
	T-Shirts		\$	\$
	Health Supplies		\$	\$
	Janitorial/Housekeeping		\$	\$
	Postage		\$	\$
	Site Rental Fee		\$	\$
	Other		\$	\$