Budget Submission Form											ENCLOSURE E		
Ministry Title:								Ministry Chair and Phone Number:					
	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Total
Proposed Events and Activities													
Proposed Events and Activities													
Proposed Events and Activities													
Proposed Events and Activities													
Proposed Budget													
Approved Budget													
Comment:		-			8		8					•	