



## Project Proposal Form

**Date:**

**County:**

**Work Group:**

**Project Name:**

**Requester:**

**Requester Contact Info:**

**Brief Description of Project:**

**Requesting:**

**WMFC Endorsement**

**WMFC Funding**

**WMFC to handle funds**

# WMFC Planning Sheet

**Workgroup:**

**Date:**

**Goal:**

**Situation:**

**Objective:**

**Strategy:**

What action steps have to be taken?	By whom?	When will it be done?	How will it be accomplished?

**Notes:**

# WMFC Project Budget Form

County:

Workgroup:

Project Name:

Budget Category	Description	Cost
Personnel		
Travel		
Equipment		
Supplies		
Contractual		
Other		
<b>Total:</b>		

Source of Project Funding	Amount

**Note:** If funding will be handled by the Western Maryland Food Council through the Western Maryland RC&D, please be advised that an administrative fee of 10% will be assessed.