

BUDGET REQUEST FORM FOR SUPPORT ORGANIZATIONS FY 2027-2028

All requests must be made on this form and returned to the **Town of Boothbay Harbor, 11 Howard Street, Boothbay Harbor, Maine 04538, or email to harsenault@boothbayharbor.org by January 4, 2027.** Failure to submit completed request form by the deadline will result in denial of submission. Please submit this form with a copy of your organization's most recent audit report and your proposed budget for the upcoming year. If you have any questions, please call us at 633-3671.

Name of organization: _____

Amount of Request: \$ _____ Amount received last year from Boothbay Harbor: \$ _____

Mailing address: _____

Contact: _____ Telephone: _____

Employer Identification Number: _____ Date Incorporated: _____ Type of Corporation: _____

Number of paid employees in the organization: _____ Number of volunteers: _____

List the top three corporate officers and annual gross salary:

NAME	POSITION	GROSS SALARY	HOURS WORKED
_____	_____	\$ _____	_____
_____	_____	\$ _____	_____
_____	_____	\$ _____	_____

List top three paid employees and annual gross salary:

_____	_____	\$ _____	_____
_____	_____	\$ _____	_____
_____	_____	\$ _____	_____

How long has your organization been serving Boothbay Harbor? _____ Number of residents served last year? _____

What is your organization's total budget for this period: \$ _____ Amounts received from the following towns:

	AMOUNT RECEIVED IN FY 2027	AMOUNT REQUESTED in FY 2028
Boothbay	\$ _____	\$ _____
Edgecomb	\$ _____	\$ _____
Southport	\$ _____	\$ _____
Total federal and state funds	\$ _____	\$ _____

I ATTEST THAT THE ABOVE INFORMATION IS COMPLETE AND ACCURATE.

Signed: _____ Date Signed: _____

Print Name: _____ Title/Position: _____