**DETAILED BUDGET REQUEST FORM – SOUTH DAKOTA SWIMMING**

1. **PROJECT DETAILS** Date Submitted:

Project Name:

Project Originator (Name): Phone:

Committee: Location:

Desired Project Timing: Start Date: Completion Date:

1. **PROJECT DESCRIPTION/JUSTIFICATION**
2. **PROJECT COST ESTIMATE** – attach detailed breakdown of costs.

 FINANCE USE ONLY: Approved/Denied: Signed: