

Supplemental Sheet: (if requesting capital funds)

Project Cost: \$ _____

Basis of Cost: _____

If based on appraisal: Market value: \$ _____

Income stream value: \$ _____

Replacement value: \$ _____

Time schedule: _____

If construction project: Preliminary drawings: _____

Construction bids: _____

Permits: _____

Groundbreaking: _____

Anticipated completion: _____

If acquisition project: Appraisal date: _____

Contract date: _____

Settlement date: _____

Project manager: _____

Qualifications: _____

Impact on current operating budget: _____
