**APPENDIX C-3**

**FY 2026-27 SUPPLEMENTAL BUDGET FORM - USE OF OTHER RESOURCES**

**Organization/Agency:** _____

**Project Title:** _____

1. If other funds will be used on this project, describe how these funds will be used.

2. Describe your plans to seek new funding to supplement CDBG funding. Describe the sources to which you will apply, the amounts sought, and the proposed use of those funds.

3. Describe your use of donated goods or services. Estimate the value of these services and describe how you arrive at these amounts.

4. Please provide an explanation for any unusual budget expenditures listed in the line item budget.

5. Explain why you consider your program costs to be reasonable.