



James H. McBride Arboretum

Project Details

Project Number _____

Project Name _____

Description of Project *(including separate estimated costs for each item if known)*:

Total Estimated Cost \$ _____

Maximum Amount to be Paid:

- a. by EMP & reimbursed by JMA Board \$ _____
- b. by EMP General Fund \$ _____
- c. by EMP Donation Fund \$ _____
- d. by EMP & reimbursed by: \$ _____

- e. directly by: \$ _____

GRAND TOTAL \$ _____

BGSU Firelands Authorization

Date

MetroParks Staff Member

Date

MetroParks Director Approval

Date