

Exhibit "A"

Chamber - ACTIVITY # <u>A</u> : Chamber/PB Tech 1909 Accelerator	Yearly Goal	Qtr 1 Ending 12/31/18	Qtr 2 Ending 3/31/19	Qtr 3 Ending 6/30/19	Qtr 4 Ending 9/30/19	TOTAL	% Annual Goal Achieved	On target	Below expected goal
OUTPUTS									
1. Accelerator Program									
CoStarter Educational Courses	8					0	0%		
UNION 1776 Accelerator Mentorship Months	4					0	0%		
Attendees	50					0	0%		
2. Mentorship Program									
Onboard Local Mentors	25								
Mentorship Performance Indicators :	25								
Active Users									
Total Users									
Total Paying Customers									
Total FTE's									
Market Size									
Total Reveune Generated									
Quarterly Revenue									
Capital Raised to Date									
Cash on Hand									
Monthly Burn Rate									
Runaway in Months									
Average Value of Subscripion, Transaction, Account									
Mentorship Hours per Month	1					0	0%		
Attendees	50					0	0%		
Menors Onboarded Countywide									
3. Coworking Program									
Leverage Coworking Facilities in PBC- The KTCHN									
Leverage Coworking Facilities in PBC									
Create Delray Coworking Space									
Coworking Passport Monthly	0					0	#DIV/0!		
Expand Coworking Members	4					0	0%		
Expand Coworking Programs to New Members	50					0	0%		
OUTCOMES									
1. Accelerator Program									
Graduates	50					0	0%		
Compainies Lauched	10					0	0%		
Increase Tax Base from Startups									
Employment Opportunities in Tech Sector and Other									
Delray Beach known as a Leading Innovation City									
2. Mentorship Program									
Onboard Local Mentors	25								
Mentorship Hours per Month	1					0	0%		

	A	B	C	D	E	F	G	H	I	J
1	FY 2018-19 "Exhibit B"									
2	Combined Budget Form - FY 2018-19									
3	Organization Name; _____									
4	INCOME		FY 2018-2019 ____ Quarter Actual		FY 2018-2019 Actual YTD thru X/XX/XX		FY 2018-19 Organization Total Budget		Variance Favorable (Unfavorable)	
5	Fees, Tickets, Registration, etc.									
6	Corporate Grants/Contributions									
7	Individual Donations									
8	Foundation Grants									
9	Government - Federal									
10	Government- Local/County									
11	Government- State									
12	In-Kind									
13	Interest Income									
14	Membership									
15	CRA Actual or Requested		-				-			
16	Other:									
17	Other:		-							
18	Other:									
19	Total Income		-		-		-		-	
20										
21	EXPENSES		FY 2018-2019 ____ Quarter Actual		FY 2018-2019 Actual YTD thru X/XX/XX		FY 2018-19 Organization Total Budget		Variance Favorable (Unfavorable)	
22	Salaries & Related Taxes									
23	Fringe Benefits									
24	Professional Svcs/Consulting									
25	Insurance									
26	Licenses, Registration, Permits									
27	Conferences & Meetings									
28	Copying & Printing									
29	Equipment Rental/Maintenance									
30	Rent/Mortgage & Maintenance									
31	Utilities									
32	Telecommunication									
33	Office & Program Supplies									
34	Postage & Delivery									
35	Local Travel									
36	Capital Expenditures									
37	Other:									
38	Other:									
39	Sub-Total Expenses		-		-		-		-	
40	Total Expense		-		-		-		-	
41										

	A	B	C	D	E	F	G	H	I	J
1	FY 2018-19 "Exhibit B"									
2	Program A Budget Form - FY 2018-19									
3	Organization Name; _____									
4	INCOME	FY 2018-2019 ____ Quarter Actual	FY 2018-2019 Actual YTD thru X/XX/XX	FY 2018-19 Organization Total Budget	Variance Favorable (Unfavorable)					
5	Fees, Tickets, Registration, etc.									
6	Corporate Grants/Contributions									
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10	Government- Local/County									
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12	In-Kind									
13	Interest Income									
14	Membership									
15	CRA Actual or Requested	-				-				
16	Other:									
17	Other:	-								
18	Other:									
19	Total Income	-	-			-	-			
20										
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26	Licenses, Registration, Permits									
27	Conferences & Meetings									
28	Copying & Printing									
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30	Rent/Mortgage & Maintenance									
31	Utilities									
32	Telecommunication									
33	Office & Program Supplies									
34	Postage & Delivery									
35	Local Travel									
36	Capital Expenditures									
37	Other:									
38	Other:									
39	Sub-Total Expenses	-	-			-	-			
40	Total Expense	-	-			-	-			
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1	FY 2018-19 "Exhibit B"									
2	Program B Budget Form - FY 2018-19									
3	Organization Name; _____									
4	INCOME	FY 2018-2019 ____ Quarter Actual	FY 2018-2019 Actual YTD thru X/XX/XX	FY 2018-19 Organization Total Budget	Variance Favorable (Unvavorable)					
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15	CRA Actual or Requested	-					-			
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17	Other:	-								
18	Other:									
19	Total Income	-	-	-	-					
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39	Sub-Total Expenses	-	-	-	-					
40	Total Expense	-	-	-	-					
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