NEW YORK STATE OF OPPORTUNITY. | Agriculture & NYS Horse Breeding Development Fund

Form #105

ADDITIONAL ITEMS FOR COST ESTIMATES FOR REPAIRS

Name of County Fair/Society: ____

Address: ____

Year: __________________________

NOTE: When work is to be done by contract, show estimate as one figure in the TOTAL column.

Project Number	Item of Work	Quantity	Unit Price	Labor Cost	Cost of Materials, Equip., etc.	TOTAL
Amount Requested on this Form						

Amount Requested on this Form
Add the amount requested on this form to Form #104
Attach this form to Form #104