

BUSINESS PLAN FOR NON-HOSPITAL RELATED PROJECTS

Campus:

Building:

	Years															
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16-20

Source of Funds

Deferred Maintenance Sinking Fund																
TOTAL OPERATING COSTS																
Debt Service																
Principal																
Interest																
Lease Payments																
TOTAL COST																

SURPLUS/DEFICIT