

MUST BE COMPLETED IN FULL FOR PLACEMENT CONSIDERATION.
(For Donations, use Section B)

A. Item Currently Budgeted -

No Financial Impact

Account Name _____

Account Number _____

Fund _____

Function _____

Object _____

Cost Center _____

Project _____

Sub Project _____

Original
Approved
Budget

+

Budget
Amendments

-

Expenditures /
Encumbrances
To Date

=

Current
Available
Budget

-

Present
Request

=

Remaining
Balance
Available

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

Account Name _____

Account Number _____

Fund _____

Function _____

Object _____

Cost Center _____

Project _____

Sub Project _____

Original
Approved
Budget

+

Budget
Amendments

-

Expenditures /
Encumbrances
To Date

=

Current
Available
Budget

-

Present
Request

=

Remaining
Balance
Available

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

B. Item Currently Not Budgeted -**

Funding Source _____

Account Name _____

Account Number _____

Fund _____

Function _____

Object _____

Cost Center _____

Project _____

Sub Project _____

Amount \$ _____

Funding Source _____

Account Name _____

Account Number _____

Fund _____

Function _____

Object _____

Cost Center _____

Project _____

Sub Project _____

Amount \$ _____

C. History

Check one:

Prior Year Budget: ☐New for Current Year: ☐

Prior Year Approved Budget: \$ _____

Prior Year Actual Spent: \$ _____

**** WHEN ITEM NOT CURRENTLY BUDGETED IS APPROVED BY THE SCHOOL BOARD, THIS WILL SERVE AS THE BUDGET AMENDMENT****