

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

A. Item Currently Budgeted -

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	Millage - Safety					
Account Name	Millage	Professional and Technical SVC	Office of Safe Schools	Voted Millage Safety	Safe Schools	
Account Number	1120	7900	3100	9551	00106	70040
	Fund	Function	Object	Cost Center	Project	Sub Project
Amount	\$ 91,416.00					

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****