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

A. Item Currently Budgeted -

Account Name: Various Funding source

Account Number	1100E/3XXX	7400	XXXX	9009	XXXX	
	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
$ 55,000.00		$ 0.00		$ 0.00		$ 55,000.00		$ 55,000.00		$ 0.00

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****

Budget Sheet - Revised Sept. 24, 2021