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

A. Item Currently Budgeted -

Account Name: No Financial Impact-Donation funds of $1,000,000.00 to HCEF

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: Various Capital Accounts

Account Number:

Fund	Function	Object	Cost Center	Project	Sub Project
3XXXE	7400	6XXX	0251	MXXX	

Original Approved Budget	+ -	Budget Amendments	-	Expenditures / Encumbrances To Date	=	Current Available Budget	-	Present Request	=	Remaining Balance Available
$ 190,061.00		$ 0.00		$ 0.00		$ 190,061.00		$ 190,061.00		$ 0.00

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: $ 0.00
Prior Year Actual Spent: $ 0.00

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

Budget Sheet - Revised Sept. 24, 2021