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 ___General Fund/Capial Projects Funds 2024-2025 Fiscal Year_____

Account Name _____

Account Number ___1100/3xxx___ ___7700/7900/6400___ ___3200/3700___ ___9315/9410___ ___40900/40100___ _____

Fund	Function	Object	Cost Center	Project	Sub Project

Amount $4,365,600.78 _____

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