## MUST BE COMPLETED IN FULL FOR PLACEMENT CONSIDERATION.

(For Donations, use Section B)

A. Item Currently Budget	ed -					
Account Name	School Adr	ministration Out-	of-State Travel-Brd Aր	oprl Academic Svcs	FL MUSA	
Account Number	1100E	7300	3340	9410	89000	
	Fund	Function	Object	Cost Center	Project	Sub Project
Original Approved Budget	Budget + Amendme			Present - Request =	Remaining Balance Available	
\$ 6,414.00	\$ 0.00	\$ 0.00	\$ 6,414.00	\$ 5,000.00	\$ 1,414.00	
Account Name						
Account Number						
l	Fund	Function	Object	Cost Center	Project	Sub Project
Original Approved Budget	Budget + Amendme			Present - Request =	Remaining Balance Available	
\$	\$	\$		\$	\$	
B. Item Currently Not Bur Funding Source Account Name Account Number	Fund	Function	Object	Cost Center	Project	Sub Project
Funding Source						
Account Name						
Account Number	Fund	Function	Object	Cost Center	Project	Sub Project
Amount	\$					
C. History						
Check one:	O •					
	Prior Year Approved					
	Prior Year Actual Spe	ent: \$				

<sup>\*\*</sup> WHEN ITEM NOT CURRENTLY BUDGETED IS APPROVED BY THE SCHOOL BOARD, THIS WILL SERVE AS THE BUDGET AMENDMENT\*\*