

Complete Section A or B; and C

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	Student Self Pay					
Account Name	Volleyball					
Account Number	8020E	9800	3310	0391	92000	03200
	Fund	Function	Object	Cost Center	Project	Sub Project
Amount	\$ 3,070.00					

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**