MUST BE COMPLETED IN FULL FOR PLACEMENT CONSIDERATION.

(For Donations, use Section B)

		Additional Mill	Salary/Fringe/Out of Co	unty Travel A	cademic Services Milla	ge	
Account Number		1120E	5900	1300/1xxx/2xxx/3xxx	9410	00108	
	-	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	
92,979.17	\$	0.00	\$ 0.00	\$ 92,979.17	\$ 92,979.17	\$ 0.00	
Account Name							
Account Number		Fund	Function	Object	Cost Center	Project	Sub Project
Oriminal							
Original Approved Budget	+	Budget Amendments	Expenditures / - Encumbrances To Date	Current = Available Budget	Present - Request	Remaining = Balance Available	
\$	•		¢	¢	¢	\$	
	<u>Ψ</u>		Ψ	Ψ	Ψ	_Ψ	•
Funding Source Account Name	-						
	-						
Account Number	-	Fund	Function	Object	Cost Center	Project	Sub Project
Amount	\$						
Funding Source							
	-						
Funding Source			Function	Ohject	Cost Center	Project	Sub Project
Funding Source Account Name	\$	Fund	Function	Object	Cost Center	Project	Sub Project
Funding Source Account Name Account Number	\$	Fund	Function	Object	Cost Center	Project	Sub Project
Funding Source Account Name Account Number Amount	\$	Fund	Function	Object	Cost Center	Project	Sub Project
Funding Source Account Name Account Number Amount History Check one: Prior Year Budget:	0	Fund	Function	Object	Cost Center	Project	Sub Project
Funding Source Account Name Account Number Amount . History Check one:	0 &	Fund		Object	Cost Center	Project	Sub Projec
Funding Source Account Name Account Number Amount History Check one: Prior Year Budget:	O ⊗	Fund	Function \$	Object	Cost Center	Project	Sub Project

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