MUST BE COMPLETED IN FULL FOR PLACEMENT CONSIDERATION.

(For Donations, use Section B)

A. Item Currently Budgeted	d -					
Account Name	Impact Fees-	Eastside Eleme	entary New Clas	sroom & Cafeteria	a Buildings	
Account Number	3960E	7400	6800	0171	C1800	
	Fund	Function	Object	Cost Center	Project	Sub Project
Original Approved Budget	Budget + Amendments	Expenditures / - Encumbrances To Date	Current = Available Budget	'	Remaining = Balance Available	
\$ 101,868.00	\$ 0.00	\$ 0.00	\$ 101,868.00	\$ 101,868.00	\$ 0.00	<u></u>
Account Name						
Account Number	Fund	Function	Object	Cost Center	Project	Sub Project
Out win all			-		-	Sub i rojeci
Original Approved 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
Amount <u>s</u>		•	- ,			,
Funding Source						
Account Name						
Account Number	Fund	Function	Object	Coat Contar	Droinet	Cub Project
Amount <u>s</u>	Fund \$	Function	Object	Cost Center	Project	Sub Project
C. History						
Check one:))					
ı	Prior Year Approved Budget:					
1	Prior Year Actual Spent:					

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