MUST BE COMPLETED IN FULL FOR PLACEMENT CONSIDERATION. (For Donations, use Section B)

Account Name	_	General Fund - Prof	essiona	I Services							
Account Number		1100		7500		3100		9210		49500	00000
	-	Fund		Function	_	Object		Cost Center		Project	Sub Projec
Original Approved Budget	+ -	Budget Amendments	-	Expenditures / Encumbrances To Date	=	Current Available Budget	-	Present Request	=	Remaining Balance Available	
25,000.00	\$		\$	-0-	\$	25,000.00	\$	25,000.00		\$ -0-	
Account Name											
Account Number	-	Fund		Function		Object		Cost Center	_	 Project	Sub Projec
Original Approved	+	Budget Amendments	-	Expenditures / Encumbrances	=	Current Available	-	Present Request	=	Remaining Balance	

B. Item Currently Not Budgeted - Funding Source Account Name	**					
Account Number Amount	Fund	Function	Object	Cost Center	Project	Sub Project
Funding Source						
Account Number	Fund	Function	Object	Cost Center	Project	Sub Project

C. History		
Check one: Prior Year Budget: New for Current Year:	8 0	
	Prior Year Approved Budget:	\$24,000.00
	Prior Year Actual Spent:	\$24,000.00

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