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 SS-Printing Supply Account

Account Name 2023-2024 Budget

Account Number

1100	E6100	5100	9440	5110	
Fund	Function	Object	Cost Center	Project	Sub Project

Amount $ 3,000.00

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: $ 3,000.00

Prior Year Actual Spent: $ 318.00

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