

BOARD OF TRUSTEES
AGENDA

<input type="checkbox"/> Workshop	<input checked="" type="checkbox"/> Regular	<input type="checkbox"/> Special
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- (A) Report Only Recognition

Presenter(s):

Briefly describe the subject of the report or recognition presentation.

- (B) Action Item

Presenter(s): SAMUEL MIJARES, SUPERINTENDENT
ISMAEL MIJARES, DEPUTY SUPERINTENDENT FOR BUSINESS & FINANCE

Briefly describe the action required.

CONSIDER AND TAKE APPROPRIATE ACTION ON THE REQUEST TO AMEND THE GENERAL FUND BUDGET.

- (C) **Funding source: Identify the source of funds if any are required.**

- (D) **Clarification: Explain any question or issues that might be raised regarding this item.**

SEE ATTACHED MEMORANDUM.



EAGLE PASS INDEPENDENT SCHOOL DISTRICT

TO: Samuel Mijares, Superintendent

FROM: Ismael Mijares, Deputy Superintendent for Business & Finance 

DATE: AUGUST 1, 2023

SUBJECT: *Budget Amendment*

Attached is a General Fund Budget Amendment to realign funds for Fund 172 - TRS Care On-behalf to complete the 2022-2023 school year.

Eagle Pass Independent School District

BUDGET CHANGE REQUEST

FUND: 172

TRS CARE ON-BEHALF

PAGE 1 OF 1

DATE: 8/1/2023

REFERENCE NO. _____

ACCOUNT NUMBER									NOM.	AMOUNT INCREASE/(DECREASE)	
FUND	FUNC	OBJ.	SUB- OBJ.	ORG.	PROG.			DESCRIPTION			
172	00	5XXX			3	XX	X	XX	REVENUE	+	1,000,000
172	11	6XXX			3	XX	X	XX	TRS CARE ON-BEHALF	+	(500,000)
172	36	6XXX			3	XX	X	XX	TRS CARE ON-BEHALF	-	500,000
172	51	6XXX			3	XX	X	XX	TRS CARE ON-BEHALF	-	500,000
172	52	6XXX			3	XX	X	XX	TRS CARE ON-BEHALF	-	500,000
TOTAL										0.00	

REASON FOR REQUEST: REALIGNMENT OF FUNDS.

ORIGINATOR 8-2-23

DATE 8-2-23
 FINANCE DATE

_____ SUPERINTENDENT _____ DATE _____
 _____ BOARD OFFICER _____ DATE _____

DISAPPROVAL: _____ NAME _____ DATE _____

REASON FOR DISAPPROVAL: _____

PROCESSED BY ACCOUNTING: _____ NAME _____ DATE _____