

**WEST ORANGE COVE - CONSOLIDATED INDEPENDENT SCHOOL DISTRICT**

**BUDGET CHANGE REQUEST**

TRANSFER       AMENDMENT       APPROPRIATION

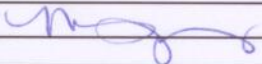
<b>ISSUING ORGANIZATION</b>	<b>DATE</b> 1/8/2015	<b>REQUEST NUMBER</b>
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**EXPENDITURE**

<b>ACCOUNT NUMBER</b>	<b>ACCOUNT DESCRIPTION</b>	<b>CURRENT EXPENDITURE BUDGET</b>	<b>INCREASE OR DECREASE</b>	<b>AMENDED EXPENDITURE</b>
199-41-6219-00-749-099-926	District Wide - Professional Services	7,500.00	-4,000.00	3,500.00
199-41-6499-00-749-099-926	District Wide-Misc Operating Costs	4,000.00	4,000.00	8,000.00
<b>TOTAL EXPENDITURE</b>		<b>11,500.00</b>	<b>0.00</b>	<b>11,500.00</b>

Reason for Request:

District Membership Fees

ORIGINATOR:	Clara Booker	DATE:	1/8/2015
ORGANIZATIONAL MANAGER:		DATE:	
PROGRAM DIRECTOR (IF APPLICABLE):		DATE:	
BUSINESS MANAGER:		DATE:	1/12/15
BOARD OF TRUSTEES APPROVAL:		DATE:	

14-50017

Cb 1/8/15