RECEIVED
MAY 2 1 2014
BUSINESS OFFICE

WEST ORANGE COVE - CONSOLIDATED INDEPENDENT SCHOOL DISTRICT

BUDGET CHANGE REQUEST
TRANSFER _____ AMENDMENT

DATE	REQUEST NUMBER
May 21, 2014	

REVENUE

		CURRENT REVENUE	INCREASE OR	AMENDED
ACCOUNT NUMBER	ACCOUNT DESCRIPTION	BUDGET	GET DECREASE	REVENUE
H 0 10 1				
	TOTAL REVENUE	0.00	0.00	0.00

EXPENDITURE

		CURRENT EXPENDITURE	INCREASE OR	AMENDED
ACCOUNT NUMBER	ACCOUNT DESCRIPTION	BUDGET	DECREASE	EXPENDITURE
199-13-6411.00-900-023-753	STAFF DEVELOPMENT	\$8,248.00	(\$225.00)	\$8,023.00
199-21-6495.00-900-023-753	PROFESSIONAL DUES	\$0.00	\$225.00	\$225.00
	TOTAL EXPENDITURE	\$8,248.00	\$0.00	\$8,248.00

Reason for Request:

PAYMENT OF DUES FOR PROFESSIONAL ORGANIZATIONS.

ORIGINATOR:	MICAELA THIBODEAUX		DATE:	May 21, 2014
ORGANIZATIONAL MANAGER:		11, 1	/ DATE:	
PROGRAM DIRECTOR	DR. BRANT GRAHAM	Teal 210	DATE:	May 21, 2014
BUSINESS MANAGER:	9/10	wers	DATE:	5/28/4
BOARD OF TRUSTEES APPROVAL:		1	DATE:	

ADM-007

REVISED 9/98

URSID SVOOTSBRETO JEST

2014 MAY 21 M 9: 20

MOITARTRINIMOA

