

DOC. ID:	65-25-91
FED. TAX ID.:	85-6000-130
Please Identify One:	
<input checked="" type="checkbox"/> X	General Fund/Capital Outlay/Debt
<input type="checkbox"/>	Direct Grant
<input type="checkbox"/>	Flowthrough <input type="text" value="11000"/>
	(Program of Adm.)
Name	DISTRICT OP
SELECT ONE:	
<input type="checkbox"/>	INITIAL BUDG. (Flowthrough)
<input type="checkbox"/>	INCREASE
<input type="checkbox"/>	DECREASE
<input checked="" type="checkbox"/> X	MAINTENANCE
<input type="checkbox"/>	TRANSFERS

SCHOOL DISTRICT CERTIFICATION			SDE APPROVAL	
SUPERINTENDENT	DATE	ANALYST	PROGRAM DIRECTOR	DATE
FISCAL OFFICER	DATE		AGENCY SPPORT/SCHOOL BUD.	DATE