

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.

GENERAL FUND

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

SEE ATTACHED MEMORANDUM.

TO: Samuel Mijares, Superintendent

FROM: Ismael Mijares, Deputy Superintendent for Business & Finance

DATE: April 1, 2022

SUBJECT: *Budget Amendments*

This is the third of three (3) times during the year when principals and directors are allowed to submit budget amendments to transfer funds within their allocation. Attached are the General Fund Budget Amendments submitted by the campuses and departments.

Eagle Pass Independent School District

BUDGET CHANGE REQUEST

Fund: 166

Bilingual

PAGE 1 OF 1

DATE: 2/22/2022

REFERENCE NO. _____

ACCOUNT NUMBER

FUND	FUNC	OBJ.	SUB-OBJ.	ORG.	PROG.			DESCRIPTION	NOM.	AMOUNT INCREASE/(DECREASE)	
166	13	6XXX	XX	XXX	2	XX	X	XX	Consulting Services	+	(14,600)
166	21	6XXX	XX	XXX	2	XX	X	XX	Travel Administration	-	4,000
166	31	6XXX	XX	XXX	2	XX	X	XX	Misc. Contracted Serv & Other Testing	-	10,600
TOTAL										-	

REASON FOR REQUEST: REALIGNMENT OF FUNDS

	ORIGINATOR	<u>2/23/22</u>
	SUPERINTENDENT	DATE
	BOARD OFFICER	DATE

DISAPPROVAL: _____ NAME _____ DATE _____

REASON FOR DISAPPROVAL: _____

PROCESSED BY ACCOUNTING: _____ NAME _____ DATE _____

Eagle Pass Independent School District

BUDGET CHANGE REQUEST

Fund: 167

PAGE 1 OF 1

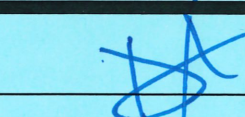

DATE: 3/3/2022

REFERENCE NO. _____

ACCOUNT NUMBER										NOM.	AMOUNT INCREASE/(DECREASE)
FUND	FUNC	OBJ.	SUB- OBJ.	ORG.	PROG.			DESCRIPTION			
167	11	63XX	XX	XXX	2	XX	X	XX	SUPPLIES AND MATERIALS	-	3,900
167	11	64XX	XX	XXX	2	XX	X	XX	OTHER OPERATING EXPENSES	+	(16,600)
167	13	62XX	XX	XXX	2	XX	X	XX	PROFESSIONAL & CONTRACTED	+	(5,300)
167	13	64XX	XX	XXX	2	XX	X	XX	OTHER OPERATING EXPENSES	+	(15,000)
167	21	63XX	XX	XXX	2	XX	X	XX	SUPPLIES AND MATERIALS	-	37,000
167	31	64XX	XX	XXX	2	XX	X	XX	OTHER OPERATING EXPENSES	+	(4,000)
									TOTAL		-

REASON FOR REQUEST: REALIGNMENT OF FUNDS

ORIGINATOR *Jose Antonio Castellon*

	<u>3/4/22</u>		
	DATE	SUPERINTENDENT	DATE
	<u>4-1-22</u>		
FINANCE	DATE	BOARD OFFICER	DATE

DISAPPROVAL: _____
NAME DATE

REASON FOR DISAPPROVAL: _____

PROCESSED BY ACCOUNTING: _____
NAME DATE

Eagle Pass Independent School District

BUDGET CHANGE REQUEST

173-2 EARLY ED.

Date: 03/28/22

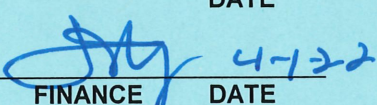
REFERENCE NO. _____

ACCOUNT NUMBER

ACCOUNT NUMBER							AMOUNT	
FUND	FUNC	OBJ.	SUB-OBJ	DRG	PROG.	DESCRIPTION	NOM.	INCREASE/(DECREASE)
173	11	6XXX			2 XX	INSTRUCTIONAL	-	410
173	51	6XXX			2 XX	PLANT MAINTENANCE & OPERATIONS	+	(410)
								0

REASON FOR REQUEST: To realign funds continue operations for the 2021-2022 school year.

ORIGINATOR _____

DATE	SUPERINTENDENT	DATE
	_____	_____
FINANCE DATE	BOARD OFFICER	DATE

DISAPPROVAL: _____ NAME _____ DATE _____

REASON FOR DISAPPROVAL:

PROCESSED BY ACCOUNTING: _____ NAME _____ DATE _____

Eagle Pass Independent School District

BUDGET CHANGE REQUEST

199-2 M & O FUND

Date: 03/08/22

REFERENCE NO. _____

ACCOUNT NUMBER

ACCOUNT NUMBER						DESCRIPTION	NOM.	AMOUNT INCREASE/(DECREASE)
FUND	FUNC	OBJ.	SUB- OBJ/DRC	PROG.				
199	11	6XXX		2	XX	INSTRUCTIONAL	+	(1,545)
199	12	6XXX		2	XX	INSTRUCTIONAL RESOURCES AND MEDIA	+	(500)
199	23	6XXX		2	XX	SCHOOL LEADERSHIP	-	3,829
199	31	6XXX		2	XX	GUIDANCE COUNSELING & EVALUATION SRVS	-	429
199	36	6XXX		2	XX	CO-CURRICULAR/EXTRA CURRICULUM	+	(10,008)
199	51	6XXX		2	XX	PLANT MAINTENANCE & OPERATIONS	-	7,795
								0

REASON FOR REQUEST: To realign funds in the M & O Fund to continue operations for the 2021-2022 school year.

ORIGINATOR _____

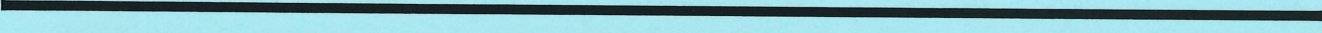


	DATE		SUPERINTENDENT			DATE
	4-1-22					
FINANCE	DATE		BOARD OFFICER			DATE



DISAPPROVAL: _____ NAME _____ DATE _____

REASON FOR DISAPPROVAL:



PROCESSED BY ACCOUNTING: _____ NAME _____ DATE _____