



Local Service Plan

2023-2024 Adjustment Request Form

Willamette
EDUCATION SERVICE DISTRICT

Integrity ♦ Innovation ♦ Excellence ♦ Partnerships

District: _____ Contact Person: _____ Phone Number: _____

Service to be adjusted: _____

Increase Decrease Resolution Contracted

Please provide description or details and reason for request:

Signature of Requesting District Superintendent

Date

Please complete this section and send to:
Laura Norbury
Laura.Norbury@wesd.org ♦ Phone 503.385.4609
Business Office, 2611 Pringle Rd SE, Salem, OR 97302



WESD USE ONLY FROM THIS SECTION DOWN

Approved Pending Denied

Department Director

Date

LSP Adjustment Complete? Yes No Comments: _____

Accounting Manager

Date

Executive Director, Business Services

Date