2023-24 PERSONNEL COMMISSION BUDGET

DISTRICT _____

Please complete the following Account Code Information:

FUND	RESOURCE	PROGRAM	FUNCTION	OBJECT	SCHOOL	MANAGEMENT

Please submit the completed budget on or before May 31, 2023 to SBCSS-BAS, 760 E. Brier Dr., San Bernardino, CA 92408, Attention: Beverly Pierce.

	COLUMN 1 2020-21 ADOPTED BUDGET	COLUMN 2 2020-21 ACTUAL OR ESTIMATED	COLUMN 3 2021-22 BUDGET
2000 CLASSIFIED SALARIES:			
23XX Commission Members			
2300 Classified Supervisor and Administrators' Salaries			
2400 Clerical, Technical, and Office Staff Salaries			
2900 Other Classified Salaries			
SUBTOTAL (2000):	$ -	$ -	$ -
3000 EMPLOYEE BENEFITS:			
3100 STRS			
3200 PERS			
3300 OASDI/ARS/MEDICARE			
3400 Health and Welfare			
3500 Unemployment Insurance			
3600 Workers' Compensation Insurance			
3700 OPEB			

3900 Other Benefits			
SUBTOTAL (3000):	$ -	$ -	$ -
4000 BOOKS AND SUPPLIES: 4200 Other Books 4300 Other Supplies 4400 Noncapitalized Equipment			
SUBTOTAL (4000):	$ -	$ -	$ -
5000 SERVICES, OTHER OPERATING EXPENSES 5200 Travel, Conference & Other Reimbursement 5300 Dues and Memberships 5500 Utilities and Housekeeping Services 5600 Rentals, Leases, Repairs 5700 Inter-Program Services (Printing, Repairs) 5800 Other Services and Expenditures 5900 Communicatons			
SUBTOTAL (5000):	$ -	$ -	$ -
6000 CAPITAL OUTLAY 6400 Equipment 6500 Equipment Replacements			
SUBTOTAL (6000):	$ -	$ -	$ -
TOTAL EXPENDITURES	$ -	$ -	$ -

Certification

I, Personnel Commission Chairman, hereby certifies that in accordance with Education Code section 45253, a public hearing was held on _____ , 2023, following which this budget was adopted by the Personnel Commission of the _____ School District. I further certify that the Personnel Commission has discharged all of its responsibilities in accordance with Education Code Section 45253.

The District's Chief Business Official certifies to above budget being completely and accurately reflected in District's Adopted Budget.

Signature
PERSONNEL COMMISSION CHAIRMAN

Date : _____

Signature
APPROVED BY
SAN BERNARDINO COUNTY
SUPERINTENDENT OF SCHOOLS

Date : _____

Signature
DISTRICT CHIEF BUSINESS OFFICIAL

Date : _____

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