

Calcasieu Parish School Board - Federal Programs
REQUEST FOR EXPENDITURE OF FUNDS

School/Consultant:

REQUEST #:

Location
Code

Date (MMDD)

V

Funding Source:

STIPENDS, SUBSTITUTES, BUS DRIVERS

Type of Expenditure:

Total Cost:

Activity:

Date(s):

TUITION ASSISTANCE, TESTING FEES, CONTRACT SPEAKER (attach quote)

Type of Expenditure:

Total Cost:

Payment to:

COPIER RENTAL/MAINTENANCE, WIRING, INSTALLATION (attach quote/contract)

Type of Expenditure:

Total Cost:

Payment to:

ADMISSION TICKETS, CHARTER BUS, SITE LICENSE, TRAVEL

Type of Expenditure:

Total Cost:

Payment to:

Travel - Conference Name:

Date(s):

of Registrants:

TOTAL Reg. Fees:

Hotel:

Meals:

Mileage:

Airfare:

Miscellaneous:

Cost:

SUPPLIES (attach quote with SHIPPING)/ FE SUPPLIES

Type of Expenditure:

Total Cost:

Payment to:

EQUIPMENT-\$5000+PER ITEM (attach quote with SHIPPING)

Payment to:

Total Cost:

COMMENTS OR NOTES

For Title IV ONLY: *select one of the following*

Safe & Healthy

Well-Rounded

Technology PD

APPROVALS

Request Preparer:

Date:

Principal/Consultant:

Date:

FP Funds Coordinator:

Funds Available:

Date:

FP Supervisor:

Approved

Date:

FP Director

Approved

Date:

COMMENTS OR NOTES (IF DISAPPROVED)