

**CONTINENTAL LOCAL SCHOOL DISTRICT
BUDGET AND PURPOSE STATEMENT**

PURPOSE STATEMENT

Date _____ Fund Number _____ - _____

Student Activity Name _____

Student Advisor/Sponsor Name _____

Purpose of Student Activity _____

BUDGET STATEMENT

BEGINNING BALANCE: \$ _____ (A)

ESTIMATED RECEIPTS:

SOURCE:

AMOUNT:

1. _____ \$ _____

2. _____ \$ _____

3. _____ \$ _____

4. _____ \$ _____

5. _____ \$ _____

TOTAL ESTIMATED RECEIPTS: \$ _____ (B)

TOTAL REVENUE: (A+B) \$ _____ (C)

ESTIMATED EXPENDITURES:

DESCRIPTION:

AMOUNT:

1. _____ \$ _____

2. _____ \$ _____

3. _____ \$ _____

4. _____ \$ _____

5. _____ \$ _____

TOTAL ESTIMATED EXPENSES: \$ _____ (D)

ANTICIPATED ENDING BALANCE: (C-D) \$ _____ (E)

NOTES/COMMENTS: _____

ADVISOR SIGNATURE/DATE _____

PRINCIPAL SIGNATURE/DATE _____

SUPERINTENDENT SIGNATURE/DATE _____

Please return to the Treasurer