Accounting Operations - School Internal Funds					VAL OF DITURE(S) FROM IAL FUNDS		
DATE:							
TO:	SUPERINTEN	DENT OF SCHOO	LS				
FROM:			, Principal				
			(School Name)				
			(Teacher	(Teacher in Charge of Trip)			
			Secretar	y/Bookkeep	per ii	nitials	
NOTE: This form is to be used for Internal Funds Expenditure(s) of \$10,000 or more up to \$50,000. Any expenditure(s) of \$50,000 or greater must be approved by the School Board and made through the Purchasing Department. (Must be accompanied by quotes from three (3) or more sources or (1) vendor with an existing contract.) Date(s) of Trip: Trip Location:							
Purpose of Tr	ip:						
Approval is requested to make the following purchase(s) to be paid from internal funds:							
DESCRIPTION (BUS, HOTEL, TICKETS, SHIRTS, ETC.)					COST		
TOTAL COST					COCT		
ANY "DISTRICT-FUNDED" ITEMS (IE, PAID FOR BY WORKFORCE, FOUNDATION, ETC.)					COST	FUNDING SOURCE	
FOR DISTRICT	USE ONLY						
Internal Funds - Ba	alance:	Verified by:	Date:				
	•	Date: Date:					
*Subject to the follow	•	Pute					
				OVED			
	APPROVED, Subject to the following (if any):					ng (if any):	
9500-INT-509 R	evised: April 2, 2025		Supe	rintendent		Date	