



ACSIP EXPENDITURE CHECKLIST

Purchase and check requests for use of funds must be supported by the school's ACSIP. Please complete the form below and return the form to the district office with EACH request. For on-line purchase requisitions, this completed form along with supporting documents and if applicable, the approved/signed technology plan must be scanned. All purchases \$25,000 and greater must have board approval.

*****For scans, please include the purchase requisition number in the subject line.**

Name: _____

School: _____ Date: _____

Required Scanned Documents: Copy of Requisition _____ Vendor Order Form
 _____ Approved Technology Plan _____ 18-19 Budget Summary _____

Funding: Title I _____ NSLA _____ PD _____ SIG 1003(a) _____

On-line Purchase Requisition Number: _____

Expenditure Type:

- _____ Salaries and Benefits (Stipends)
- _____ Purchased Services (contracts, presenters, substitutes)
- _____ Travel - must be accompanied by a "Travel Approval Request" and leave form. After submitting the "Out of District Final Expense Report," approved expenditures will be reimbursed by the Office of Federal Programs, Professional Development, and State Categorical Funds.
- _____ Materials and supplies
- _____ Parent Involvement
- _____ Capital Outlay (equipment over \$1,000)

Brief Description of Expenditure: _____

Budget String (*Must Match Purchase Requisition)

Fund Source	Function	Location	Program	Subject	Object

Amount Allocated _____

Amount Previously Spent _____

Amount Requested: _____

Salary & Benefit (stipends) Salary _____ Benefit _____

Substitutes _____

Remaining Allocation: _____

Bookkeeper Signature: _____

Principal Signature: _____

****Incomplete ACSIP Expenditure Checklist forms will not be processed and will be returned to the school.

******All contracts must be reviewed and approved by the district office before a contract is signed.**