Title Expenditure Form

*Please complete and submit this document with ALL Title requisitions, stipend & travel requests.

Please select: ○ Title I  ○ Title II  ○ Title III  ○ Title IV  ○ School Improvement

School Name: ___________________________________________ Date: __________________________

Vendor or Activity Type: ___________________________________________ Amount: __________________________

1) Provide a detailed description of how funds will be used and where resources/ items will be located:
________________________________________________________________________________________________

2) Identify the specific Theme and Critical Initiative of your ACIP that this purchase will support. (Title I only)
________________________________________________________________________________________________

3) Identify the specific section of your grant application or Needs Assessment that this purchase will support. (Title II, III, IV only)
________________________________________________________________________________________________

4) Which General Ledger (GL) number (s) did you use to request funding? Please refer to your Title Budget Excel Worksheets and/or the Budget Analysis Reports.
________________________________________________________________________________________________

5) Is there funding allocated to support this line item? _____YES _____NO

6) What is your estimated budget balance after this purchase? ________________________________

7) Is this a field trip? _____YES _____NO

   Cost for Students ______________________ Cost of Buses ______________________ other ______________________

8) Timeline (expected start and end times if applicable): ________________________________

________________________________________________________________________________________________

Bookkeeper or Responsible Party Signature ____________________________ Date __________________________

Principal Signature ____________________________ Date __________________________