

TO: Deanna Schettine
 FROM: _____
 DEPT: _____
 DATE: _____
 RE: District Billing

FISCAL YEAR: 2020-2021

Increase budget Decrease budget

Fund BC:

| | | | | | | | | | | | | | | | | |
|--|--|--|---|--|--|--|--|---|--|--|--|--|---|--|--|--|
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| <u>Service Code</u> | <u>District</u> | <u>Service Description</u> | <u>Service Date</u> | <u>Cost</u> |
|---------------------|-----------------|----------------------------|---------------------|-------------|
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PO Adjustment (if any) PO #: _____
 Comment: increase/decrease/no change in PO

For Finance Office Only: _____

- _____ Budget
- _____ Billing
- _____ A/P