

INITIAL BUDGET REVISED INITIAL BUDGET
 AMENDMENT # _____ Upward Downward Level

PROJECT NUMBER			LEA SUBMISSION DATE (mm/dd/yyyy)
FISCAL YEAR 10	SOURCE OF FUNDS CODE 4936-7	REGION, COUNTY, DISTRICT, TYPE CODE	
FISCAL/ADMINISTRATIVE AGENT			
PROGRAM CONTACT		TELEPHONE NUMBER (Include Area Code)	
CONTACT E-MAIL ADDRESS		FAX NUMBER (Include Area Code)	

ILLINOIS STATE BOARD OF EDUCATION
 Curriculum and Instruction Division
 100 North First Street, C-215
 Springfield, Illinois 62777-0001

FY 2010 ILLINOIS MATHEMATICS AND SCIENCE PARTNERSHIP PROGRAM
Budget Summary and Payment Schedule

Use whole dollars only. Omit dollar signs, commas and decimals, e.g., 2536

ISBE USE ONLY	PROGRAM APPROVAL DATE AND INITIALS	
	TOTAL FUNDS	
	CARRYOVER FUNDS	
	CURRENT FUNDS	
	BEGIN DATE	END DATE

Directions: Prior to preparing this Budget Summary and Payment Schedule request, please refer to the "State and Federal Grant Administration Policy and Fiscal Requirements and Procedures" handbook that can be accessed at <http://www.isbe.net/funding/pdf/fiscal_procedure_handbk.pdf>. Further information can be accessed at "General Grant Information Frequently Asked Questions" at <http://www.isbe.net/funding/pdf/general_grant_faq.pdf>.

LINE	FUNCTION NUMBER 1	EXPENDITURE ACCOUNT 2	SALARIES 3	EMPLOYEE BENEFITS 4	PURCHASED SERVICES 5	SUPPLIES AND MATERIALS 6	CAPITAL OUTLAY** 7	NON-CAPITALIZED EQUIPMENT** 9	TOTAL 11	PAYMENT SCHEDULE
			(Obj. 100s)	(Obj. 200s)	(Obj. 300s)	(Obj. 400s)	(Obj. 500s)	(Obj. 700s)		
7	2210	Improvement of Instruction Services								July-August
10	2300	General Administration Capped at 10%								September
20	2620	Planning, Research Development and Evaluation Services								October
26	4000	Payments to Other Districts and Governmental Units								November
28	Total Direct Cost									December
30	Total Budget									January
										February
										March
										April
										May
										June
										July-August
										TOTAL \$ _____

ISBE USE ONLY

Date

Original Signature of Superintendent or Authorized Official

Date

Original Signature of ISBE Division Administrator, Curriculum and Instruction

