

SACRAMENTO CITY UNIFIED SCHOOL DISTRICT

Request to Carryover Excess Balances

TO: District Business Department

FROM: _____
Principal

The following organization requests approval to carryover an amount in excess of the 20% limit:

I. School _____

II. Calculation of Excess Carryover:

A. Total Estimated Revenues _____

B. Line A Multiplied by 0.20 _____

C. Amount of Carryover Requested _____

D. Excess Carryover (Line B minus Line C) _____

III. Please provide an explanation of the need to carryover excess amounts and the expected date of the use of these funds:

IV. Approval

Accounting Specialist

Date