DEPARTMENT OF EDUCATION

NATIONAL PROGRAM SUPPORT FOR BASIC EDUCATION

STATEMENT OF EXPENDITURES

DIVISION SUMMARY SHEET

Category:
Period Covered:
Region:
Division:
SOE No:

	PAYEE
	NAME OF SCHOOL
	GRANT RECEIVED
	REFERENCE Check No. Date
	RENCE Date
	AMOUNT UTILIZED
	BALANCE
	DESCRIPTION OF EXPENSES
	REMARKS

Division Accountant

Division SBM Coordinator

Chair, DivisionSBM Task Force Schools Division Superintendent

Certified Correct:

Prepared by:

Noted by: