

State Supplemental Visually Impaired Flow Through Funds
2017-2018

Date: _____

_____ ISD is awarded _____ for the 2017-2018 school year in SSVI funds for VI services/materials/expenses.

Copies of paid receipts, detailed journals, and/or other documentation of actual expenditures to vendor and/or employee must be attached.

BUDGET	REIMBURSEMENT AMOUNT
Payrolls Costs (6100)	
Professional/Contracted Services (6200)	
VI Specific Supplies & Materials (6300)	
Other Operating Expenses (6400)	
TOTAL (Not to exceed awarded amount indicated above)	

I hereby certify that this report is true and correct and that funds have been expended on specific services and/or materials for students with visual impairments. I certify that I am an authorized representative of this LEA and that the LEA has complied with all legal purchasing requirements and district purchasing procedures.

Print Name and Title of Authorized Officer

Telephone Number

Authorized Signature

Region 7 ESC, Special Education Coordinator

Region 7 ESC, Special Education Director

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Submission Deadline: June 1, 2018