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INSTRUCTIONS (Refer to Title 2, California Code of Regulations Sections 1859.104 and 1859.106)

For purposes of completing this form enter the total amount spent for the project, including expenditures that may exceed the State and district shares authorized by the State Allocation Board.

- 1. Enter the estimated percentage of the project completed at the time of this report.
- 2. Enter the earliest issue date of the notice to proceed to the construction contractor.
- Enter the date construction was completed as stated in the notice of completion on the last working contract.
- 4. If this is the first report submitted, enter "so" in this column. If there are prior reports, the amount reported in this column is the amount reported in column 6 of the preceding report.
- 5. Enter the transaction amounts during the current report period.
- 6. Enter the sum of the corresponding line items in columns 4 and 5.
- 7. If applicable, enter the district's future SFP financial hardship project(s) that savings from this project will be applied.

Provide a detailed listing of each expenditure listing items by:

- Warrant, date of warrant, payee, warrant number, and description/purpose of the expenditure.
- Identify any savings and the purposes for which it will be used. Identify expenditures
 made with district force account labor separately.
- The use of a transaction record, in lieu of warrant number, is acceptable for force account expenditures.
- Identify amounts applied to the project for incentive grants or rebates received by the district pursuant to Public Utilities Code Section 381. Refer to Sections 1859.77.1 and 1859.79.

Go to the OPSC Web site at www.dgs.ca.gov/opsc for the Project Information and Expenditure Worksheets (an Excel worksheet) which may be used to assist in reporting these expenditures.

Submit completed form to: **Department of General Services**

Office of Public School Construction

Attn: SFP Audit 707 Third Street

West Sacramento, CA 95605

EXPENDITURE REPORTSCHOOL FACILITY PROGRAM

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SCHOOL DISTRICT		COUNTY		APPLICATION NUMBER
BUSINESS ADDRESS/CITY			REPORT NUMBER	
SCHOOL NAME		DSA NUMBER	CDS NUMBER	PERIOD ENDING
PREPARER'S NAME (TYPED) PREPARER'S TITLE (TYPED)			TELEPHONE NUMBER/E-MAIL ADDRESS	I .
DISTRICT REPRESENTATIVE NAME (TYPED)	DISTRICT REPRESENTATIVE TITLE (TYPED)		TELEPHONE NUMBER/E-MAIL ADDRESS	
1. Percent of Project Complete: 2. Notice to Proceed Issue Date: 3. Notice of Completion Date: 4. Previous Report 5. Report Period 6. Total to Date				
District Funds or Joint-Use Partner(s) Contribution				
State Funds				
Interest Earned				
Project Expenditures				
7. If applicable, list the amount of savings from this find hardship project which has not yet been apportioned Project Number Project Number I certify, as the District Representative, that the information	ed. Attach written declarat Amount of Savin Amount of Savin	ion of savings pursuant to S gs \$ gs \$		cility Program financial
 I am designated as an authorized district representative be under penalty of perjury, under the laws of the State of Construction of this project; and, this form is an exact duplicate (verbatim) of the form provided prevail. 	alifornia, the foregoing stater	nents are true and correct, and		
SIGNATURE OF DISTRICT REPRESENTATIVE			DATE	