

## **Grant Administration and Support Office Expenditure Plan**

**Program Type:**

**Local Educational Agency:**

Submit this form if your agency has expended less than 50 percent of the initial payment by December 31, 2023. Please complete the following Expenditure Plan and submit it to your California Department of Education (CDE) fiscal analyst **with your Expenditure Report**.

**Total Grant Award for the 2023 Fiscal Year:**

In narrative form, please explain why your agency has expended less than 50 percent of the initial payment and what your plan will be to expend the remainder of your funds by the end of your grant award period. If you need additional space, please include a separate document.

A Budget Change Request (BCR) and BCR Signature Form must be submitted if there is a 10 percent change to any one-line item. Please submit them to your CDE fiscal analyst if applicable. Are you planning to submit a BCR at this time?

Yes      No

**Program Coordinator Name:**

**Program Coordinator Email:**

**Program Coordinator Signature:**

**Date Signed:**

**Program Fiscal Contact Name:**

**Program Fiscal Contact Email:**

**Program Fiscal Contact Signature:**

**Date Signed:**