

(Revised 06/14)

				Agency Name and Number FINAL BUDGET REPORT Fund Name and Number For the fiscal year July 1, 20XX to June 30, 20XX			Report No. 6	
All programs				APPROPRIATIONS (ADJUSTED)	EXPENDITURES	ENCUMBRANCE/ ALLOCATED ENCUMBRANCE	BUDGETARY EXPENDITURES	BALANCE
FFY	PROGRAM/CAT	AT	APPROPRIATION DESCRIPTION					
REGULAR APPROPRIATIONS								
20XX	10-00-000-000	00	PROGRAM 10 NAME	236,672.74-	16,003.53	0.00	16,003.53-	220,669.21-
20XX	20-00-000-000	00	PROGRAM 20 NAME	590,754.71-	2,106.49	0.00	2,106.49-	588,648.22-
20XX	30-00-000-000	00	PROGRAM 30 NAME	681,458.35-	9,383.88	0.00	9,383.88-	672,074.47-
20XX	40-01-000-000	00	ADMINISTRATION (CHARGES)	32,664.08-	2,407.55	0.00	2,407.55-	30,256.53-
20XX	40-02-000-000	00	DISTRIBUTED ADMINISTRATION (RECOVERIES)	32,664.08	2,407.55-	0.00	2,407.55	30,256.53
TOTAL FOR REGULAR APPROPRIATIONS				1,508,885.80-	27,493.90	0.00	27,493.90-	1,237,456.59-
SCHEDULED REIMBURSEMENTS								
20XX	90		SCHEDULED REIMBURSEMENTS	1,347,625.35	0.00	0.00	0.00	1,347,625.35
TOTAL FOR SCHEDULED REIMBURSEMENTS				1,347,625.35	0.00	0.00	0.00	1,347,625.35
*TOTAL REFERENCE 001				161,260.45-	27,493.90	0.00	27,493.90-	133,766.55-

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FINAL BUDGET REPORT
Fund Name and Number
For the fiscal year July 1, 20XX to June 30, 20XX

Report No. 6

Report as of June 30 includes year-end accruals pursuant to State Administrative Manual instructions.

I certify (or declare) under penalty of perjury that the foregoing is true and correct and that I have not violated any of the provisions of Article 4, Chapter 1, Division 4, Title 1, Government Code (commencing with section 1090).

Subscribed and executed this _____ day of _____, 20XX at Sacramento, California.

SIGNATURE OF OFFICER

First and Last Name
TYPE OR PRINT NAME OF OFFICER

Title of Signer
TITLE OF FISCAL OFFICER

I certify (or declare) that the expenditures shown on this budget report have been made for the purposes stated in the budget, as implemented by the Budget Act, except as the purposes stated have been revised, in accordance with law, by the Department of Finance subsequent to the enactment of the Budget Act.

SIGNATURE OF HEAD OF STATE AGENCY

First and Last Name
TYPE OR PRINT NAME

Title of Signer
TITLE