

**BOSSIER PARISH COMMUNITY COLLEGE
 GENERAL FUND BUDGET ENHANCEMENT PROPOSAL
 NEW NON-RECURRING COSTS REQUEST**
 Object of Expenditures – Justification

Date Submitted: _____ Budget Unit Head: _____
 Account Number _____ Account Title _____
 Budget Unit Head Signature: _____

Expenditure Object	Amount Requested	*NR	Justification

*When requesting Capital Outlay, identify expenditure as either (R – Replacement) or (N-New)
 These pages may be duplicated if more space is required.