

Please check one box only:

- September 30, 2022     December 31, 2022  
 March 31, 2022     June 30, 2023     Final

DISTRICT NAME AND NUMBER	
REGION, COUNTY, DISTRICT, TYPE CODE	
NAME OF AUTHORIZED OFFICIAL	
ADDRESS (Street, City, State, ZIP Code)	
TELEPHONE (Include Area Code)	FAX (Include Area Code)
EMAIL	

**ILLINOIS STATE BOARD OF EDUCATION**  
 Standards and Instruction  
 100 North First Street, N-242  
 Springfield, Illinois 62777-0001  
  
**FY 2023**  
**EXPENDITURE REPORT FOR**  
**SCHOOL TECHNOLOGY REVOLVING LOAN PROGRAM**

**Use whole dollars only.**  
**Omit dollar signs, decimal places, and commas,**  
**e.g., 2536**

<b>ISBE USE ONLY</b>	LOAN AMOUNT
	EXPENDITURE AMOUNT
	EXPENDITURE REVIEW DATE
	APPROVERS INITIAL

**DIRECTIONS:** Mail original signed copy to the address above. Money must be obligated within six months of the receipt of the loan. Report is due no later than nine months following receipt of the loan.

TOTAL EXPENDITURE/OBLIGATION					
FUNCTION NUMBER	EXPENDITURE ACCOUNT	PURCHASED SERVICES	SUPPLIES AND MATERIALS	CAPITAL OUTLAY	TOTALS
		(Obj. 300s)	(Obj. 400s)	(Obj. 500s)	
1000	Instruction				
2210	Improvement of Instruction Services				
2220	Educational Media Services				
2530	Facilities Acquisition and Construction				
APPROVED EXPENDITURE/OBLIGATION TOTALS					

ISBE USE ONLY

\_\_\_\_\_  
 Date **Original** Signature of Superintendent or Authorized Official

\_\_\_\_\_  
 Date **Original** Signature of ISBE Division Administrator