Wisconsin Department of Public Instruction
PROGRAM FISCAL REPORT
PI-1086 (Rev. 10-09)

10/8/09

Mail to:

WISCONSIN DEPARTMENT OF PUBLIC INSTRUCTION
SCHOOL MANAGEMENT SERVICES TEAM
FEDERAL AIDS AND AUDIT SECTION
P.O. BOX 7841
MADISON, WI 53707-7841
Fax Number: (608) 267-9207

District Number	District/Agency Legal Name			Report Period Ending Date	Program *Specify*
Project Grant Number	Project Name			Project Beginning Date	Project Ending Date
Name of Person Preparing this Report		Telephone *Area/No.*		E-mail address	

Account Code (Fund-Object-Function-Project)	Account Name	Approved Budget	Unliquidated Encumbrances (Payables)	Total Disbursements to Date	Unencumbered Balance
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
	TOTALS	**$ -**	**$ -**	**$ -**	**$ -**

Cash Summary

Funds Rec'd to Date	Disbursements to Date	Cash on Hand at End of Period
	$ -	**$ -**

Matching Funds, if applicable (Documentation on File at District Office) **$ -**

Type of Report *(Click Appropriate box(es))*

☐ Advance ☐ Final Claim
☐ Partial Claim ☐ Encumbrance

AMOUNT REQUESTED

FOR DPI USE ONLY
AMOUNT APPROVED

CERTIFICATION I CERTIFY that all revenue and disbursements reported herein are properly substantiated and reconciled with the financial transactions of this District's/Agency's general ledger, and have not been claimed under any other state or federal program.

Signature of District/Agency Administrator	Date