

# Request for Waiver - Cash Balance Penalty

SDCL 13-13-73.5

School District:

Click in cell C4, then click on dropdown



Penalty Fiscal Year:

2020

Lowest Monthly Cash Balance, General Fund (FY2019)

  

Total General Fund Expenditures (FY2019)

Cash Balance %

State Aid Fall Enrollment, Fall 2017

State Aid Fall Enrollment, Fall 2018

State Aid Fall Enrollment, Fall 2019

Allowable Cash Balance Percentage

Amount Exceeding Allowable Percentage

**Total Amount of Waiver Request**

Amended Cash Balance %

**State Aid Adjustment (FY2020)**

Please explain the reason(s) for this request:

The School Finance & Accountability Board may consider a waiver due to special circumstances such as:

- 1) Revenue needed in following year(s) due to a natural disaster; or
- 2) Funding needed to expand educational programs; or
- 3) Impact of reorganization; or
- 4) Any unforeseen or extenuating circumstance explain ed on this request.

Contact Person:

Date:

Title: