

FBMS ENTRY DOCUMENT (FED)

1. CENTRAL BUDGET OFFICE

| |
|-----------------|
| Date Received: |
| |
| Date Processed: |
| |

2. REGIONAL BUDGET OFFICE

| |
|-----------------|
| Date Received: |
| |
| Date Processed: |
| |

3. REQUESTING ORGANIZATION TITLE: _____

4. REQUESTED FUNDING CHANGE

| | Version 0 | Version 1 | FBMS Entry Number |
|------------------|-----------|-----------|--|
| Total + Request | | | V0 |
| Total - Request | | | V1 |
| TOTAL NET | | | V1 |

5. AUTHORITY

This is a distribution of base funding.

6. Budget Process

**7. Reprogramming Type
(Legislative Field)**

8. JUSTIFICATION/PURPOSE: [ATTACH ALL PERTINENT DOCUMENTS]

9. CONDITIONS: THESE FUNDS ARE SUBJECT TO THE CONDITIONS AND RESTRICTIONS OF 26 IAM.

10. CENTRAL OFFICE BUDGET

**11. CENTRAL OFFICE PROGRAM / BIE /
REGIONAL OFFICE / OSG**

| | |
|---|---|
| PROGRAM ANALYST | AGENCY / TRIBE |
| REQUESTED BY: _____ DATE _____ | REQUESTED BY: _____ DATE: _____ |
| CHIEF, DIVISION OF _____ | SUPERINTENDENT / PGM MGR / EDUCATION LINE OFFICER |
| APPROVED BY: _____ DATE _____ | APPROVED BY: _____ DATE: _____ |
| DIRECTOR, OFFICE OF _____ | BIE/REGIONAL/CENTRAL OFFICE BUDGET OFFICER |
| APPROVED BY: _____ DATE _____ | CERTIFIED BY: _____ DATE: _____ |
| CENTRAL OFFICE BUDGET ANALYST | BIE/REGIONAL DIRECTOR |
| CERTIFIED BY: _____ DATE _____ | APPROVED BY: _____ DATE: _____ |
| DIRECTOR, OFFICE OF BUDGET AND PERFORMANCE MANAGEMENT | DIRECTOR, OFFICE OF SELF GOVERNANCE |
| APPROVED BY: _____ DATE: _____ | APPROVED BY: _____ DATE: _____ |