## KANSAS STATE DEPARTMENT OF EDUCATION

## **Perkins Program Income Form**



USD number:	Name of educat	tional institution:		/ \
Contact name:			Title:	
mail:			Phone:	
used in the gene	eration of Program I in the generation	າ Income. If you ເ	used local fui	e the equipment and/or supplies nds to purchase the equipment an not need to report Program Income
Pathw	vay Name	Income Source	Gross Income Amount	Explain how income was re-invested
I certify that all prograi	m income was expended pr	ior to drawing additional fe	deral grant funds	
		Data		
Signatur	e of preparer	Date		

For more information, contact: Helen Swanson Coordinator Career, Standards and Assessment Services (785)2 96-4912 hswanson@ksde.org

Kansas leads the world in the success of each student.