

## Wisconsin Department of Public Instruction PROGRAM FISCAL REPORT PI-1086 (Rev. 09-16)

Refer to instructions at: http://dpi.wi.gov/sms/fedaids/pi-1086

Mail to: DEPARTMENT OF PUBLIC INSTRUCTION SCHOOL MANAGEMENT SERVICES TEAM FEDERAL AND STATE GRANT PROGRAMS

PO BOX 7841

MADISON, WI 53707-7841 Fax: (608) 267-9207

District / Agency No.	District / Agency Legal N	Name		CFDA No. or State Statute	Report for Period Ending		
Grant Number	Program					Project Beginning Date	Project Ending Date
Name of Person Preparing this Report			Phone Area/No.		Email Address		Total Amount \$0.00
			CERTIFICATION				Ψ0.00
purposes and objectives criminal, civil, or adminis	s set forth in the terms an strative penalties for fraud	best of my knowledge and belied conditions of the federal award, false statements, false claims,	d. I am a or other	aware that any false, fictition rwise. (U.S. Code, Title 18,	us, or fraudulent information, Section 1001 and Title 31, Se	or the omission of any mater ctions 3729-3730 and 3801-3	ial fact, may subject me to 8812.)
Name of District / Agency Administrator or Designee <i>Print or type</i>		Title of District / Agency Administrator or Designee  Print or type		r or Designee	Signature of District / Agency Administrator or Designee		Date Signed Mo./Day/Yr.
				SUMMARY	•		
Account Code Fund-ObjFuncProj.		Account Name		Approved Budget	Obligations	Total Disbursements to Date	Unencumbered Balance
-							

				SUMMARY			
Account Code Fund-ObjFuncProj.	Д	ccount Name		Approved Budget	Obligations	Total Disbursements to Date	Unencumbered Balance
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			TOTALS	\$ -	\$ -	\$ -	\$ -
	Cash Summary	lo	Matchi	ing Funds If Applicable Repnentation on file at		Amount Requested This Claim	
	Total Disbursements to Date	Cash on Hand at End of Period		t Office	Advance Final Claim		
\$	\$ -	\$	\$		Partial Claim Revised Final		
DPI Use Only			•				
Fiscal Year Voucher No. Voucher Date Pay		Pay D	Pate	Amount Approved			
0					0		