FY 2015-16 Bank Account and Transparency Accountability Report FY 2016-17 Appropriation Act, Proviso 117.83

Agency Name/Number: Account Name: Purpose of Account:			I710 Wil Lou Gray Opportunity School Student Funds Funds on Deposit For Student			
Exemption Requested: If exemption is requested.	, reason:	Yes	X	No		
Exemption Approved in I	Prior Year:	Yes	X	No		
Authorized Personnel Check Writing/Withdraw	val:					
Name: Title	Melissa Rae Thurstin Administrative Manager					
Name: Title:	Theresa "Libby" Key Accountant					
Reconciliation: Name: Title	Charles Hilton Administrative Specialist	t				
Name: Title:						
Financial Information						
Beginning Balance at July	y 1, 2015:			4,369.8	35	
Detailed Transactions Du Deposits (Please list each of		es as nee	ded.)			
DATE	Amount			Source	e	
7/1/2015 to 6/30/2016	70,363.05	Parental	Fees			
Withdrawals: (Please list	each withdrawal separately	. Add lin	nes as neede	d)		
DATE	Amount]	Payee	Descrip	otion of Goods/Services Pu	ırchased
7/1/2014 - 6/30/2015	58,962.69				Student Expenses	

15,770.21

Ending Balance at June 30, 2015: