



FLOYD COUNTY BOARD OF EDUCATION  
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Linda C. Gearheart, Board Chair - District 1  
William Newsome, Jr., Vice-Chair - District 3  
Dr. Chandra Varia, Member- District 2  
Keith Smallwood, Member - District 4  
Steve Slone, Member - District 5

**DATE: November 21, 2023**

**CONSENT AGENDA ITEM:** Consent Agenda Item: Consider/Approve submitting a Capital Funds Request to the Kentucky Department of Education seeking authorization to use capital outlay funds for cost associated with BG 24-100 Prestonsburg High School Turf Replacement.

**APPLICABLE STATUTE(S), REGULATION(S), BOARD POLICY/PROCEDURE(S):**  
KRS 160.470 (6)(a); BOE policy 04.1

**FISCAL/BUDGETARY IMPACT:** This CFR \$434,959.00 is associated with BG 24-100.

**STAFF RECOMMENDATION & RATIONALE:** Approve as presented

**CONTACT PERSON:** Tiffany Warrix Campbell, Director of Finance

  
\_\_\_\_\_  
DIRECTOR

  
\_\_\_\_\_  
SUPERINTENDENT

**Kentucky Department of Education  
Capital Funds Request Form**

1	District: <u>Floyd</u>	District #: <u>175</u>	FY: <u>2024</u>	For KDE Internal USE only
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**2 Capital Outlay Fund 310 - Complete Only On Initial FY Request**

a.	Capital Outlay Fund 310 SEEK Amount	\$ <u>491,939</u>		
b.	Carryover			
c.	Interest Earned			
d.	Escrowed SFCC			SFCC Approval Date: _____
3	<b>Total Available Capital Outlay Fund 310 Revenue (Lines 2a+2b+2c+2d)</b>			\$ <u>491,939</u>

**4 Building Fund 320 - Nickels - Complete Only On Initial FY Request**

a.	Building Fund 320 Nickel SEEK Amount	\$ <u>4,998,104</u>		
b.	Carryover			
c.	Interest Earned			
d.	Additional Nickel(s) Not Shown on SEEK Calculation			
e.	Escrowed SFCC			SFCC Approval Date: _____
5	<b>Total Available Building Fund 320 Revenue (Lines 4a+ 4b+ 4c+ 4d+ 4e)</b>			\$ <u>4,998,104</u>

**Construction Fund 360 - Available Funds From Closed BGs**

6	1st Associated BG number		BG-5 or Revised BG Approval Date: _____	
	a. Remaining Capital Funds			
7	2nd Associated BG number		BG-5 or Revised BG Approval Date: _____	
	a. Remaining Capital Funds			
8	3rd Associated BG number		BG-5 or Revised BG Approval Date: _____	
	a. Remaining Capital Funds			
9	<b>Total Available Fund 360 Revenue From BGs (Lines 7+8+9)</b>			\$ <u>-</u>

**10 Previous Remaining Available Capital Funds - \*\*Complete Only On Subsequent CFRs**

10	Previous Remaining Available Capital Funds (Line 17 of previous CFR)		CFR Tracking #: _____	
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**11 Adjustment to SEEK Calculation Capital Outlay Fund and/or Building Fund Amounts \*\***

11	Adjustment to SEEK Calculation			
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**12 Capital Funds Commitments (Expenditures):**

a	FY <u>24</u> Debt Service	\$ <u>5,055,084</u>		
b	FY <u>  </u> Fund 310 and Fund 320 <b>BG-1 Cash</b>	\$ <u>0</u>		
13	<b>Total Capital Funds Commitments (Expenditures) (lines 14a+14b)</b>			<b>\$ <u>5,055,084</u></b>

**14 Available Capital Funds after Commitments (lines 3+5+9+10+11-13)**

14			\$ <u>434,959</u>	
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**15 Current Requested Expenditure Detail**

MUNIS Object Code	Description	Expenditure Amount Requested	Associated BG-# (If applicable)
0450	Construction cost for Turf replacement	\$ 434,959	24-100
16	<b>Total Amount Requested</b>	\$ <u>434,959</u>	
17	<b>Total Remaining Capital Funds Available after Capital Funds Request (lines 14-15)</b>	\$ <u>-</u>	

18. I certify to the accuracy and completeness of this Capital Funds Request along with the validity of all BG forms, SFCC escrow amounts, interest earned, and other data. I attest local board approval has been obtained for this Request. I certify the Capital Funds Request form has been properly reviewed and submitted in accordance with the guidelines and instructions promulgated by the Kentucky Department of Education.

Local Board Approval Date: \_\_\_\_\_

Superintendent Signature: \_\_\_\_\_ Print: \_\_\_\_\_ Date: \_\_\_\_\_

Finance Officer Signature: *Tiffany Campbell* Print: *Tiffany Campbell* Date: *11-21-23*

**KDE USE ONLY - REVIEWED BY THE DIVISION OF DISTRICT SUPPORT**

CFR Tracking # _____	Approval Letter Amount: _____	
Fund 1 (%): _____	Fund 1 Balance (dollars): _____	
Funding & Reporting Reviewed By: _____		
Approved Funding & Reporting: _____	Date: _____	
Approved Facilities Branch: _____	Date: _____	