

**RESPONSE TO REVIEW OF PROPOSED ANNUAL BUDGET**  
(Submit to local board office no later than ten days after Public Hearing Date)

COMMENTS PERTAINING TO A SPECIFIC SCHOOL/COST CENTER:

NAME OF SCHOOL/COST CENTER \_\_\_\_\_

COMMENTS:

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GENERAL COMMENTS (Not relating to a specific cost center):

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Submitted by: Name \_\_\_\_\_ Signature \_\_\_\_\_  
Address \_\_\_\_\_  
Telephone No. \_\_\_\_\_