

LBP Form No. 9

**STATEMENT OF FUNDING SOURCES
(SUPPLEMENTAL BUDGET)
Fiscal Year _____**

Province/City/Municipality

Fund/Special Account

Particulars (1)	Account Classification (2)	Amount (3)
1.0 New Revenue Sources Tax Revenue Loan Proceeds (Borrowings)		
2.0 Savings		
3.0 Realignment/Reversion		
Total Estimated Income		

Certified Correct:

Local Treasurer

Date

Local Accountant *

Date

INSTRUCTIONS

1. The column under new revenue source shall be filled for Supplemental Budget funded from new revenue source.
2. The column under savings shall be filled for Supplemental Budget funded from savings.
3. The column under Realignment/Reversion shall be filled for Supplemental Budget funded from reversion or realignment.
4. Indicate under column 2 the account classification using the chart of accounts as prescribed by COA.
5. Indicate under column 3 the appropriate amount for whatever funding source of the Supplemental Budget.
6. The certification to be signed by the Local Treasurer and Local Accountant shall depend on funding source (i.e., additional realized income, savings, new revenue measure/s, realignment in times of public calamity) of the Supplemental Budget to be enacted.