2009-2010 **FADBUD**



Financial Aid Office

() Personal Comment

() Revised

Financial Aid Office

5150 N. Maple Avenue, M/S JA 64 Fresno, CA 93740-8026 Fax: (559) 278-4833

Phone: (559) 278-2182

Date

() Original →Imaging

() Photo copy to student

Miscellaneous Budget Adjustment(s)

| Filing Period 9/1/09 to 4/15/10 | | | | |
|---|---|---|--|--|
| STUDENT ID | LAST NAME F | FIRST NAME | PHONE NUMBER (with area code) | |
| PLEASE PRINT IN BLACK INK | | | | |
| | odest living expenses is included in y be considered for expenses exce | | Contribution calculation. Allowable Please note: | |
| Documentation | and credit card charges are not allowed must be in the student's name. Set cases will be in the form of an acceptable. | | an limits allow. | |
| ADJUSTMENTS | | | | |
| Auto registrati Major auto rep already been | e (copy of most recent annual or so on (copy of most current registration pair occurring during the current act allowed (copy of actual paid bill - eal expenses, not covered by medical | on) ademic year; standard stimates not acceptab | d maintenance expenses have | |
| Mileage allow | ance may be considered for studer le the Fresno area and commute. | | | |
| I am requesting co academic year. R | onsideration of additional budge eason(s) are: | t items to increase n | ny Cost of Attendance for the | |
| Signature | | | Date | |
| | _ | | | |
| 7 ADDDOV50 | OFFICE USE ONLY | | | |
| ☐ APPROVED | ☐Your cost of attendance has incre☐ A revision is being processed. | • | ent changed (see comments) | |
| ☐ DENIED Reas | • | | lot changed (see comments) | |
| | | | | |
| ☐ RETURNED Info | rmation/Documentation required: | | | |
| □ OTHER/COMME | NTS | | | |
| | | | | |
| - | | | | |