Fiscal Year 2014-15  
Agency Budget Plan

FORM A – SUMMARY

**RECURRING FUNDS**  
(form B decision packages)

My agency is submitting the following recurring decision packages (Form B):

For FY 2014-15, my agency is (mark “X”):
- Requesting a net increase in recurring General Fund appropriations.
- Not requesting a net increase in recurring General Fund Appropriations.

**CAPITAL & NON-RECURRING FUNDS**  
(form C decision packages)

My agency is submitting the following one-time decision packages (Form C):

For FY 2014-15, my agency is (mark “X”):
- Requesting capital and/or non-recurring funds.
- Not requesting capital and/or non-recurring funds.

**PROVISOS**

For FY 2014-15, my agency is (mark “X”):
- Requesting a new proviso and/or substantive changes to existing provisos.
- Only requesting technical proviso changes (such as date references).
- Not requesting any proviso changes.

Please identify your agency’s preferred contacts for this year’s budget process.

<table>
<thead>
<tr>
<th>Name</th>
<th>Phone</th>
<th>Email</th>
</tr>
</thead>
<tbody>
<tr>
<td>PRIMARY CONTACT:</td>
<td>Melanie D. Barton</td>
<td>734-6148</td>
</tr>
<tr>
<td>SECONDARY CONTACT:</td>
<td>Lisa B. Nichols</td>
<td>734-6148</td>
</tr>
</tbody>
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I have reviewed and approved the enclosed FY 2014-15 Agency Budget Plan, which is complete and accurate to the extent of my knowledge.

*Signature*

Melanie D. Barton

This form must be signed by the department head – not a delegate.