

BUDGET ADJUSTMENT REQUEST & ROUTING FORM

All budget adjustment requests must include this form and should follow the request throughout execution.

Department: _____

Budget Year: _____

BUDGET ADJUSTMENT DESCRIPTION:
<i>see attached for more information</i>

From Line Item Account Number:

Amount:

To Line Item Account Number:

Amount:

JUSTIFICATION
<i>(Include any appropriate supporting documentation that is deemed necessary):</i>
<i>see attached for more information</i>

FINANCE DEPARTMENT USE ONLY					
	YES	NO	N/A	DATE	SIGNATURE
Received by Finance Department:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Reviewed and Approved by Finance Officer:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
*Reviewed and Approved by Town Manager: <i>*If budget amendment is above \$1,000 OR across departments</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
**Reviewed and Approved by Town Council: Date of Council Meeting: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
**Any budget adjustments that meet any of the following conditions must go to Town Council for approval:					
1. Recurring obligations, such as salaries					
2. Contingency					
3. Transfers between funds, such as captial reserve and/or capital project funds					
4. Interdepartmental transfers which exceed 5% of departmental appropriations for department whose allocation is reduced					
Copy Filed with Finance Department:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Budget Amendment Posted in INCODE:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____