



City of Cocoa Budget Adjustment Form FY 2017

SELECT ADJUSTMENT TYPE: \_\_\_\_\_ REQUESTING DEPARTMENT #: \_\_\_\_\_ DATE PREPARED: \_\_\_\_\_

Table with 8 columns: ADJUSTMENT AMOUNT, ACCOUNT NUMBER, PROJECT NUMBER, ACCOUNT NAME, ORIGINAL BUDGET, AMENDED BUDGET, ADJUSTED BUDGET, UNENCUMBERED BALANCE. Includes a TOTAL row at the bottom.



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REASON/JUSTIFICATION FOR ADJUSTMENT: \_\_\_\_\_

City COUNCIL APPROVAL REQUIRED? YES  NO  DATE APPROVED: \_\_\_\_\_ RESOLUTION #: \_\_\_\_\_

City Council approval is needed for all transfers greater than \$50,000 and transfers between Departments / Funds. Attach copy of agenda item and City Clerk's Journal noting approval.

Date Requestor's Signature \_\_\_\_\_ Date Finance Approval Signature \_\_\_\_\_ Date Finance Director's Signature \_\_\_\_\_

Date Department Director's Signature \_\_\_\_\_ Date Deputy Fin. Director's Signature \_\_\_\_\_ Date City Manager's Signature \_\_\_\_\_

FINANCE USE ONLY:  
Date Entered: \_\_\_\_\_ Entered By: \_\_\_\_\_ Group #: \_\_\_\_\_