



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.

Signature and date lines for Requestor, Finance Approval, Finance Director, Department Director, Deputy Fin. Director, and City Manager.

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