

FY 2025**BUDGET ADJUSTMENT FORM**

Use this form to make adjustments to your budget. All adjustments must balance within a Department.

**Adjustments should be rounded to the nearest \$1.**

ACCOUNT NUMBER	PROJECT NUMBER	ACCOUNT DESCRIPTION	ACCOUNT INCREASE		ACCOUNT DECREASE	
561-5100-535-65-46	102255	Avenue G Pump Station Improvements	\$ 30,769			
561-5000-535-65-32		Contingency			\$ 30,769	
<b>TOTAL.....</b>			<b>\$ 30,769</b>		<b>\$ 30,769</b>	

**EXPLANATION OF ADJUSTMENT REQUEST**

Include justification for increases AND reason why funds in decreased account are available.

Allocate funds for CA#4 for additional construction phase services for the Avenue G Pump Station improvements, project #102255.

DOES THIS REQUEST REQUIRE COUNCIL APPROVAL?

DATE OF COUNCIL MEETING

05/01/25

Yes



No

WITH AGENDA ITEM?



Yes



No



Approved



Disapproved



Approved



Disapproved



Approved



Disapproved

Department Head/Division Director

Date

Finance

Date

City Manager

Date

**Finance Comments (for Finance Department only)**

DESCRIPTION 1 FOR H.T.E.:

DESCRIPTION 2 FOR H.T.E.:

(To Be Entered by Finance)