## **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#	ACCOUNT DESCRIPTION	INCREASE	DECREASE	
110-0000-461-08-41		Other / Donations/Gifts	\$ 111,000		T
110-0000-461-08-30		Developer Fees	19,000		T
110-3500-552-63-32	102374	Capital Buildings & Groun / Park Fee Exp	19,000		T
110-3500-552-65-16	102374	Capital-Special Projects / Park Improvements	111,000		T
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TOTAL			\$ 260,000	\$ -	T
<b>EXPLANATION OF ADJ</b> available.	USTMENT	REQUEST- Include justification for increases AND rea	son why funds in decr	eased account are	
		res (\$111,000) related to grant funding from the National Neighborhood Play Area, project #102374.	Recreation and Park	Association. Funds w	ill
		nnet Meadows (\$2,025), Downs First I (\$1,125), Hamby 400) to cover the \$19,000 difference between the grant a			
DOES THIS REQUEST REQUIRE COUNCIL			Yes	No	
DATE OF COUNCIL MEETIN	G	10/01/20			
WITH AGENDA ITEM?		X	Yes	No	
				Approved	
Department Head/Division Director		Date		Disapproved	
				Approved	
Finance		Date		Disapproved	
				Approved	
City Manager		Date		Disapproved	