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Request No. _____
(For Finance Department Use Only)

CITY OF AURORA

Budget Transfer/Amendment Request Form

Date of Request: 07/21/2021

For Fiscal Year: 2021

Department: Public Works

Division: 4063 Water and Sewer Maintenance

CIP No.	From Account No. *	Amount **	CIP No.	To Account No. *	Amount **
	510-4058-511.73-02	\$ 50,000		510-4063-511.36-13	\$ 50,000
	510-4058-511.73-02	\$ 60,000		510-4063-511.38-34	\$ 60,000
		\$			\$
		\$			\$
		\$			\$
		\$			\$

* No transfers between funds.

** Minimum \$200; nearest \$100

Check below if this is a request for a budget amendment:

☐ A budget amendment is requested for the accounts and amounts shown in the "To Account" column above for which corresponding accounts and amounts are not shown in the "From Account" column. The current departmental or fund budget, as appropriate, is insufficient to absorb expenditures/expenses that are now expected for the remainder of this fiscal year.

Justification: 510-4063-511.36-13 non-ccdd spoils disposal; 510-4063-511.38-34 Landscape restoration: The original budget for these accounts is an estimate based on historic expenses. Actual costs vary from year to year depending on the amount and extent of unplanned emergency repairs.

Signatures and Approval

Dept./Div. Head 1: 

Dept./Div. Head 2: _____

Chief Financial Officer: _____

Approved/Disapproved/Referred to the Mayor

Comments:

Mayor: _____

Approved/Disapproved

Comments: