

DuPage County, Illinois  
 BUDGET ADJUSTMENT  
 Effective January 22, 2024

From: 1100  
 Company #

RECORDER G.I.S.  
 From: Company/Accounting Unit Name

Accounting Unit	Account	Sub-Account	Title	Amount	Finance Dept Use Only Available Balance		Date of Balance
					Prior to Transfer	After Transfer	
4320	53090		OTHER PROFESSIONAL SERVICES	\$ 7,500.00	100,000.00	92,500.00	5/20/24
Total				\$ 7,500.00			

To: 1100  
 Company #

RECORDER G.I.S.  
 To: Company/Accounting Unit Name

Accounting Unit	Account	Sub-Account	Title	Amount	Finance Dept Use Only Available Balance		Date of Balance
					Prior to Transfer	After Transfer	
4320	51040		EMPLOYEE MED & HOSP INSURANCE	\$ 7,500.00	(3,526.09)	3,973.91	5/20/24
Total				\$ 7,500.00			

Reason for Request:

Transfer funds to cover employee medical & hospital insurance costs that were not budgeted for Fiscal 2024.

[Redacted Signature]

5/20/24  
 Date  
5/20/24  
 Date

Activity \_\_\_\_\_  
 (optional)

Chief Financial Officer

\*\*\*\*Please sign in blue ink on the original form\*\*\*\*

Finance Department Use Only

Fiscal Year 24 Budget Journal # \_\_\_\_\_ Acctg Period \_\_\_\_\_

Entered By/Date \_\_\_\_\_ Released & Posted By/Date \_\_\_\_\_

FIN-5/28/24  
 LB-5/28/24

*[Handwritten mark]*