DuPage County, Illinois
BUDGET ADJUSTMENT
Effective October 1, 2024

From: 1600 (Company #)

STORMWATER MANAGEMENT
From: Company/Accounting Unit Name

Accounting Unit	Account	Sub-Account	Title	Amount	Finance Dept Use Only Available Balance: Prior to Transfer	After Transfer	Date of Balance
3000	50080		SALARY & WAGE ADJUSTMENTS	$ 104,183.00	104,183.00	Ø	10/16/25
3000	50099		NEW PROGRAM REQUESTS-PERSONNEL	$ 34,872.00	34,872.00	Ø	10/16/25
3000	50040		PART TIME HELP	$ 25,000.00	25,000.00	Ø	10/16/25
3000	51000		BENEFIT PAYMENTS	$ 10,945.00	41,669.92	30,724.92	10/16/25
			Total	$ 175,000.00			

To: 1600 (Company #)

STORMWATER MANAGEMENT
To: Company/Accounting Unit Name

Accounting Unit	Account	Sub-Account	Title	Amount	Finance Dept Use Only Available Balance: Prior to Transfer	After Transfer	Date of Balance
3000	50000		REGULAR SALARIES	$ 90,000.00	375,189.45	465,189.45	10/16/25
3000	51040		EMPLOYEE MED & HOSP INSURANCE	$ 85,000.00	(25,196.37)	59,803.63	10/16/25
			Total	$ 175,000.00			

Reason for Request:

A budget transfer is necessary to cover Salaries and employee insurance for FY25.

[redacted]
Department Head — 10.14.25 Date

Chief Financial Officer — 10/17/25 Date

Activity _____ (optional)

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

Finance Department Use Only

Fiscal Year 25 Budget Journal # _____ Acctg Period _____

Entered By/Date_____ Released & Posted By/Date_____

SW - 11/4/25
FIN/CB - 11/12/25

DuPage County, Illinois
BUDGET ADJUSTMENT
Effective October 1, 2024

From: 1000 (Company #)

CIRCUIT COURT
From: Company/Accounting Unit Name

Accounting Unit	Account	Sub-Account	Title	Amount	Finance Dept Use Only Available Balance: Prior to Transfer	After Transfer	Date of Balance
5900	50050		TEMPORARY SALARIES	$ 7,280.00	7,281.00	1.00	10/21/25
5900	53040		INTERPRETER SERVICES	$ 5,000.00	46,381.00	41,381.00	10/21/25
			Total	$ 12,280.00			

To: 1000 (Company #)

CIRCUIT COURT
To: Company/Accounting Unit Name

Accounting Unit	Account	Sub-Account	Title	Amount	Finance Dept Use Only Available Balance: Prior to Transfer	After Transfer	Date of Balance
5900	50040		PART TIME HELP	$ 12,280.00	(3,458.70)	8,821.30	10/21/25
			Total	$ 12,280.00			

Reason for Request:

Moving funds to accommodate salaries for part time staff until the end of FY25

[redacted]
Department Head — Date 10/21/25

Chief Financial Officer — Date 10/22/25

Activity _____ (optional)

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

Finance Department Use Only

Fiscal Year 25 Budget Journal # _____ Acctg Period _____

Entered By/Date _____ Released & Posted By/Date _____

JPS - 11/4/25
FIN/CB - 11/12/25

DuPage County, Illinois
BUDGET ADJUSTMENT
Effective October 1, 2024

From: 2000 (Company #)

SEWER OPERATIONS
From: Company/Accounting Unit Name

Accounting Unit	Account	Sub-Account	Title	Amount	Finance Dept Use Only Available Balance: Prior to Transfer	Finance Dept Use Only Available Balance: After Transfer	Date of Balance
2555	53828		CONTINGENCIES	$ 110,000.00	276,375.00	166,375.00	10/27/25
2640	53828		CONTINGENCIES	$ 20,000.00	214,900.00	194,900.00	10/27/25
			Total	$ 130,000.00			

To: 2000 (Company #)

SEWER OPERATIONS
To: Company/Accounting Unit Name

Accounting Unit	Account	Sub-Account	Title	Amount	Finance Dept Use Only Available Balance: Prior to Transfer	Finance Dept Use Only Available Balance: After Transfer	Date of Balance
2555	51000		BENEFIT PAYMENTS	$ 110,000.00	(106,601.85)	3,398.15	10/27/25
2640	51040		EMPLOYEE MED & HOSP INSURANCE	$ 20,000.00	(6,108.12)	13,891.88	10/27/25
			Total	$ 130,000.00			

Reason for Request:

Public Works - $110,000.00 FY25 budget transfer needed for Benefit Payments for retiring employee payouts. Public Works - $20,000.00 FY25 budget transfer needed for Employee Med & Hsp Insurance for payroll charges.

[redacted]
Department Head — Date: 10/27/2025

Chief Financial Officer — Date: 10/28/25

Activity _____ (optional)

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

Finance Department Use Only

Fiscal Year 25 Budget Journal # _____ Acctg Period _____

Entered By/Date _____ Released & Posted By/Date _____

PW - 11/4/25
FIN/CB - 11/12/25

10/24/25

DuPage County, Illinois
BUDGET ADJUSTMENT
Effective January 1, 2025

From: 1200 (Company #)

HOUSEKEEPING
From: Company/Accounting Unit Name

Accounting Unit	Account	Sub-Account	Title	Amount	Finance Dept Use Only Available Balance: Prior to Transfer	Finance Dept Use Only Available Balance: After Transfer	Date of Balance
2035	52000		FURN/MACH/EQUIP SMALL VALUE	$ 2,960.00	17,208.00	14,248.00	10/24/25
			Total	$ 2,960.00			

To: 1200 (Company #)

HOUSEKEEPING
To: Company/Accounting Unit Name

Accounting Unit	Account	Sub-Account	Title	Amount	Finance Dept Use Only Available Balance: Prior to Transfer	Finance Dept Use Only Available Balance: After Transfer	Date of Balance
2035	54110		EQUIPMENT AND MACHINERY	$ 2,960.00	3,950.00	6,910.00	10/24/25
			Total	$ 2,960.00			

Reason for Request:

move monies to cover the purchase of a walk behind sweeper that sweeps and mops difficult floors over at the Animal Control, that Environmental Services cleans for (FY25)

[redacted]
Department Head — 10/24/25 Date

Activity _____ (optional)

Chief Financial Officer — 10/28/25 Date

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

Finance Department Use Only

Fiscal Year 25 Budget Journal # _____ Acctg Period _____

Entered By/Date _____ Released & Posted By/Date _____

HS - 11/4/25
FIN/CB - 11/12/25

DuPage County, Illinois
BUDGET ADJUSTMENT
Effective April 1, 2025

From: 1000 (Company #)

FAMILY CENTER
From: Company/Accounting Unit Name

Accounting Unit	Account	Sub-Account	Title	Amount	Finance Dept Use Only Available Balance: Prior to Transfer	After Transfer	Date of Balance
1640	53020		INFORMATION TECHNOLOGY SVC	$ 2,000.00	4,100.00	2,100.00	10/23/25
1640	53510		TRAVEL EXPENSE	$ 3,000.00	5,000.00	2,000.00	10/23/25
			Total	$ 5,000.00			

To: 1000 (Company #)

FAMILY CENTER
To: Company/Accounting Unit Name

Accounting Unit	Account	Sub-Account	Title	Amount	Finance Dept Use Only Available Balance: Prior to Transfer	After Transfer	Date of Balance
1640	50000		REGULAR SALARIES	$ 5,000.00	32,093.38	37,093.38	10/23/25
			Total	$ 5,000.00			

Reason for Request:

Transfer covers deficits in Regular Salaries for FY25 that were not realized during budget preparation.

[redacted] Department Head — Date 10/21/25

Activity _____ (optional)

Chief Financial Officer — Date 10/23/25

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Finance Department Use Only

Fiscal Year 25 Budget Journal # _____ Acctg Period _____

Entered By/Date _____ Released & Posted By/Date _____

HS - 11/4/25
FIN/CB - 11/12/25

DuPage County, Illinois
BUDGET ADJUSTMENT
Effective January 1, 2025

From: 1500 (Company #)

DOT MAINTENANCE/OPS
From: Company/Accounting Unit Name

Accounting Unit	Account	Sub-Account	Title	Amount	Finance Dept Use Only Available Balance: Prior to Transfer	Finance Dept Use Only Available Balance: After Transfer	Date of Balance
3510	53828		CONTINGENCIES	$ 61,000.00	915,500.00	854,500.00	10/22/25
			Total	$ 61,000.00			

To: 1500 (Company #)

DOT MAINTENANCE/OPS
To: Company/Accounting Unit Name

Accounting Unit	Account	Sub-Account	Title	Amount	Finance Dept Use Only Available Balance: Prior to Transfer	Finance Dept Use Only Available Balance: After Transfer	Date of Balance
3510	51040		EMPLOYEE MED & HOSP INSURANCE	$ 61,000.00	38,553.79	99,553.79	10/22/25
			Total	$ 61,000.00			

Reason for Request:

Due to the unpredictable nature of employee medical and hospital insurance costs, it was impossible to accurately forecast this year's budget requirements. A budget transfer is requested to accommodate these unforeseen expenses.

[redacted]
Department Head — Date 10/20/25

Chief Financial Officer — Date 10/24/25

Activity _____ (optional)

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

Finance Department Use Only

Fiscal Year 25 Budget Journal # _____ Acctg Period _____

Entered By/Date _____ Released & Posted By/Date _____

DOT - 11/4/25
FIN/CB - 11/12/25

DuPage County, Illinois
BUDGET ADJUSTMENT
Effective January 1, 2025

From: 1500 (Company #)

DOT FLEET SERVICE
From: Company/Accounting Unit Name

Accounting Unit	Account	Sub-Account	Title	Amount	Finance Dept Use Only Available Balance: Prior to Transfer	Finance Dept Use Only Available Balance: After Transfer	Date of Balance
3520	53828		CONTINGENCIES	$ 8,500.00	816,300.00	807,800.00	10/22/25
				Total	$ 8,500.00		

To: 1500 (Company #)

DOT FLEET SERVICE
To: Company/Accounting Unit Name

Accounting Unit	Account	Sub-Account	Title	Amount	Finance Dept Use Only Available Balance: Prior to Transfer	Finance Dept Use Only Available Balance: After Transfer	Date of Balance
3520	51010		EMPLOYER SHARE I.M.R.F.	$ 4,500.00	10,603.91	15,103.91	10/22/25
3520	51030		EMPLOYER SHARE SOCIAL SECURITY	$ 4,000.00	9,802.11	13,802.11	10/22/25
				Total	$ 8,500.00		

Reason for Request:

Additional funds are required due to increased employer obligations resulting from newly implemented union salary rates. These adjustments have directly impacted the employer's share of both the I.M.R.F. contributions and Social Security taxes. A budget transfer is necessary to accommodate these changes.

[redacted]
Department Head — Date 10/20/25

Chief Financial Officer — Date 10/24/25

Activity _____ (optional)

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Finance Department Use Only

Fiscal Year 25 Budget Journal # _____ Acctg Period _____

Entered By/Date _____ Released & Posted By/Date _____

DOT - 11/4/25

FIN/CB - 11/12/25