

FY25

**DuPage County, Illinois  
BUDGET ADJUSTMENT  
Effective October 1, 2024**

From: 5000  
Company #

---

**LIHEAP GRANTS**

---

To: 5000  
Company #

---

**LIHEAP GRANTS**

*Reason for Request:*

The purpose of Budget transfer is to cover benefit payments that exceeded original budget during the year 2025.

**Signature on File**

Department Head Signature on File

---

**Chief Financial Officer**

11/21/25  
Date  
11/5/26  
Date

## Activity

---

(optional)

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

Editor-in-Chief: [Sergio Iannacchione](#) | [Volume 1, Issue 1](#) | [About Period](#)

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

Entered By/Date \_\_\_\_\_

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

HS - 1/20/26

FIN/CB - 1/27/20