From	Company #	-		From	RECOR : Company/Acco	unting Ur	Finance De	ept Use	e Only		Date of	
Unit	Account	Sub-Account	Title	Title Amount Prior to Transfer After Transfer							Balance	B/S Fund
4310	53090			1.			144.45		5, 854.		1/29/24	
4310	33090		OTHER PROFESSIONAL SERVICES	\$	12,890.00	10,1	44.45	25	5, 054.	90	1/21/24	1100-9150
			Total	\$	12,890.00							
					RECOR	DER DOCL	IMENT STO	RAGE				
To:		17		To: Co	ompany/Account	ing Unit N	Vame					
Accounting	Company #						Finance De Available				Date of	
Unit	Account	Sub-Account	Title	,	Amount	Prior to	Transfer	Aft	ter Transfe	r	Balance	B/S Fund
4310	54100		IT EQUIPMENT	\$	12,890.00	0		12,	890,c1	0	1/29/24	1100-9150
				-			_	_		$\dashv$		
				-						-		
	Reason for Requ	uest:	Total	Ś	12,890.00					7		
		L	To pay For new film	W S	scann	ers	New	ad	ers.		/-\a	24
	Activity	7	optional)	Chlef F	ment Head	W	1			ī	Date 30	m
12			***Please sign in blue ink on t	ne ong	Het JOHN							
	Fiscal Year 24	Budget Jo	Finance Department Use Only urnal # Acctg Period									
	Entered By/Date	3	Released & Posted E	βγ/Date								

FIN-2/13/24 CB-2/13/24

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DuPage County, Illinois BUDGET ADJUSTMENT Effective May 3, 2023

_						COUNTY TREASURER			
From				From: Compar	ηγ/Accountin	g Unit Name			
	Company #					FI			
counting							pt Use Only Balance	Date of	
Unit	Account	Sub-Account	Title	Amoun	nt Pri	or to Transfer	After Transfer	Balance	
5000	50030					500.00	O	121/24	
			PER DIEM/STIPEND					1/26/24	
5000	53090		OTHER PROFESSIONAL SERVICES	\$ 14,6	600.00 34	2,287.50	17,687.50	1/26/24	
			Total	\$ 21,1	100.00				
					COUN	TY TREASURER			
To:				To: Company/	Accounting L	Jnit Name			
	Company #								
counting							pt Use Only Balance	Date of	
Unit	Account	Sub-Account	Title	Amount	t Pri	or to Transfer	After Transfer	Balance	
5000	50050		TEMPORARY SALARIES		100.00 /2	104470	35.25	1/26/24	
3000	30030		TEINFORART SADARIES	\$ 21,1	100.00	1,004. [5]	20.02	17-967	
				-					
				1					
				1					
			Total	\$ 21,1	100.00				
	Reason for Requ	uest:							
			Transfer to cover Temporary salaries.						
							1		
		Į							
								1100	
				Department He	***			1/26/ Date /2	
				Department He	eau	MA		I a	
					6	VV.		( )	
	Activity	19		Chief Financial	Officer			Date	
			(optional)						
			****Please sign in blue ink on	the orlginal form	η****				
T			Finance Department Use On	v					
	2	3	Finance Department Use On	Y					
	Fiscal Year Z	3 Budget Jo	Finance Department Use On  Ournal # Acctg Perlod	γ					
	Fiscal Year Z								

FIN-2/13/24 CB-2/13/24 A

#### DuPage County, Illinois BUDGET ADJUSTMENT Effective January 22, 2024

						PPORTIVE HOUSING	GRANT	2	
From:	Company #	-		From	: Company/Acco	unting Unit Name			
Accounting							ept Use Only e Balance	Date of	
Unit	Account	Sub-Account	Title		Amount	Prior to Transfer	After Transfer	Balance	B/S Fund
1760	50000		REGULAR SALARIES	\$	1,250.00	72,503.57	71,253,57	2/1/24	5000-9209
				-	2,220.00	,			3000 3203
				-					
			Total	\$	1,250.00				
					IDHS SU	PPORTIVE HOUSING	GRANT	<u> </u>	
To:		20		To: Co	ompany/Accoun	ting Unit Name			
	Company #					Finance De	pt Use Only		
Accounting							e Balance	Date of	
Unit	Account	Sub-Account	Title		Amount	Prior to Transfer	After Transfer	Balance	B/S Fund
1760	51000		BENEFIT PAYMENTS	\$	1,250.00	(1,211.67)	38,33	2/1/24	5000-9209
						8			
			Total	s	1,250.00				
			rotai	3	1,250.00				
	Reason for Req	uest:	×				100		
			To account for accrual of benefit payments expense for FY	23					
		Į.							
							9	02/01/20	24
				Depar	treent Head			Date (	. 1
						/ W	1	28	14
	Activity			Chief I	inancial Officer		<b>.</b>	Date	
			(optional)						,
			****Please sign in blue ink on t	he orig	inal form****				
Ϊ	,		Finance Department Use Only	,					
	2	2							
	Fiscal Year	Budget Jo	purnal # Acctg Period						
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FIN - 2/13/24 CB - 2/13/24

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#### DuPage County, Illinois BUDGET ADJUSTMENT Effective January 22, 2024

From:	5000 Company #	-:		From	AGING : Company/Acco	CASE COORD unting Unit N		RANTS		-	
Accounting Unit	Account	Sub-Account	Title		Amount		Availabl	ept Use (		Date of Balance	B/S Fund
		T T T T T T T T T T T T T T T T T T T		1							1
1660	50000	-	REGULAR SALARIES	\$	100.00	1,031,612	2.48	1,05	1,512.91	2/1/24	5000-9101
				-							
			Total	\$	100.00						-V-
					AGING (	CASE COORD	UNIT G	RANTS			
To:	5000			To: C	ompany/Account					-	
8	Company #	-									
						Fina	nce De	pt Use C	Only		
Accounting			T MANAGE .					Balanc		Date of	PANAGO 1
Unit	Account	Sub-Account	Title	Т	Amount	Prior to Tra			r Transfer	Balance	B/S Fund
1660	50010		OVERTIME	\$	100.00	(85.3	4)	14.	66	2/1/24	5000-9101
				-							
			Total	\$	100.00						
	Reason for Req	n n									
			To account for additional overtime needed in Federal port	tion of	Seniors grants in	FY23					
		Į									
										y 90	
									-	02/01/20	224
				Depar	tment Head	01				Date	
						2 W	M			215	174
	Activity			Chief	inancial Officer		_1_			Date	,
	-,	15	(optional)								90
			****Please sign in blue ink on t	he orig	inal form****						
T.			Finance Department Use Only								ř
	0	2		/							
F	Fiscal Year	Budget Jo	ournal# Acctg Period								
E	ntered By/Dat	te	Released & Posted	By/Dat	e						

FIN - 2/13/24 (B - 2/13/24

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#### DuPage County, Illinois BUDGET ADJUSTMENT Effective January 22, 2024

From		_		From		DRCE INVEST ACT PRO unting Unit Name	OG GRTS		
Accounting Unit	Company #  Account	Sub-Account	774			Availabl	ept Use Only e Balance	Date of	
		3db-Account	Title		Amount	Prior to Transfer	After Transfer	Balance	B/S Fund
2840	50000		REGULAR SALARIES	\$	4,500.00	1,821,001.03	1,816,559,03	2/1/24	5000-9105
				1					
				+					
				-					
			Total	\$	4,500.00				
_				-		RCE INVEST ACT PRO	G GRTS		
To:		-		To: Co	ompany/Account	ting Unit Name			
	Company #					Finance De	pt Use Only		
Accounting							Balance	Date of	
Unit	Account	Sub-Account	Title		Amount	Prior to Transfer	After Transfer	Balance	B/S Fund
2840	51000		BENEFIT PAYMENTS	\$	4,500.00	(4,436.73)	63.27	2/1/24	5000-9105
					7				3000 3103
				-					
			Total	\$	4,500.00				
			1010		1,500.00				
	Reason for Req	uest:	14						
			To account for accrual of benefit payments expense for FY	/23			Ĭ		
		1							
		Į							
					· ·			90 E	2
								01/01/202	14
			3	Depai	tprent nead		- 4	Date (	al.
								$\gamma(z)$	4
	Activity			Chief F	inancial Officer			Date	* A
		10	(optional)						1
			****Please sign in blue ink on t	he orig	inal form****				
F			Finance Department Use Only	,					
	2	2		,					
	Fiscal Year 🚣	Budget Jo	ournal # Acctg Period						
	en e	HEV.							
1	Entered By/Dat	e	Released & Posted	By/Date	e			- 1	

FIN - 2/13/24 CB - 2/13/24

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FY23 uPage County, Illi

#### DuPage County, Illinois BUDGET ADJUSTMENT Effective January 22, 2024

From:	: 1100 Company #	-:		From:				
Accounting Unit	Account	Sub-Account	Title		Amount		ept Use Only le Balance After Transfer	Date of Balance
	1	Sub-Account.						
2910	50080		SALARY & WAGE ADJUSTMENTS	\$	2,984.00	7,500.00	4,516.00	2/7/24
				1				
				-				
			Total	\$	2,984.00			
					.,			
					(	OUNTY CLERK G.I.S	L	
To:	1100			To: Cor	npany/Account		,	_
10.	Company #	• ;		10. 00	iipaiiy/Account	ing one wante		
						Finance D	ept Use Only	
Accounting					10	Availab	le Balance	Date of
Unit	Account	Sub-Account	Title	_	Amount	Prior to Transfer	After Transfer	Balance
2910	50000		REGULAR SALARIES	\$	1,512.00	(1,511.44)	0.56	2/7/24
2910	50010		OVERTIME	\$	946.00	(945.78)	0.22	2/7/24
2910	51000		BENEFIT PAYMENTS	\$	526.00	(525.09)	0.91	2/7/24
			Total	\$	2,984.00			
			Total	13	2,564.00			
	Reason for Req	uest: ្ម						
			FY2023 Budget Transfer to cover personnel overages in C	ounty Cl	erk G.I.S. for Re	gular Salaries, Over	time, and Benefit	
			Payments. Funds will move from Salary and Wage Adjusti	ments ac	counts into the	specified accounts.		
		- 1						
		- 1						
		E						
				Departr	nent Head			Date_
				$\alpha$	lal			2/0/18
					7			210109
	Activity	95	( ))	Chief Fi	nancial Officer			Date
			(optional) ****Please sign in blue ink on t	the estate	al form####			
			Please sign in blue link on t	ine origii	iai form			
[		- 24.7	Finance Department Use Onl	у				
	Fiscal Year 2	3 Budget Id	ournal # Acctg Period					
1	Entered By/Dat	e	Released & Posted	By/Date			-	

FIN - 2/13/24 CB - 2/13/24

DuPage County, Illinois BUDGET ADJUSTMENT Effective January 22, 2024

GENERAL FUND SPECIAL ACCOUNTS 1000 From: Company/Accounting Unit Name From: Company # Finance Dept Use Only Accounting Available Balance Date of Unit Account Sub-Account Title Prior to Transfer After Transfer Balance Amount 3,005,480,00 3,002,731.00 2/6/24 1180 50080 **SALARY & WAGE ADJUSTMENTS** Ś 2.749.00 1,101,982.00 1,103,010.00 1180 51010 EMPLOYER SHARE I.M.R.F. \$ 1,028.00 636,367,00 637 318.00 1180 51030 **EMPLOYER SHARE SOCIAL SECURITY** \$ 951.00 837, 474.00 840,020.00 1200 51040 **EMPLOYEE MED & HOSP INSURANCE** 2.546.00 \$ 7,274.00 Total \_\_ Various Departments — 1000 Company # Finance Dept Use Only Accounting Available Balance Date of Sub-Account Unit Account Title Amount Prior to Transfer After Transfer Balance (2,748.40) 2/6/24 0.60 6100 50000 **REGULAR SALARIES** \$ 2,749.00 (212.73 0.27 6100 51010 \$ 213.00 EMPLOYER SHARE I.M.R.F. 210.00 (209, 49 0.51 6100 51030 **EMPLOYER SHARE SOCIAL SECURITY** \$ 222.00 (221.37 0.63 EMPLOYER SHARE I.M.R.F. \$ 6500 51010 (210.88 0.12 6500 51030 \$ 211.00 **EMPLOYER SHARE SOCIAL SECURITY** (376.46 0.54 377.00 6500 51040 **EMPLOYEE MED & HOSP INSURANCE** \$ 0.95 51010 593.00 592.0 6510 EMPLOYER SHARE I.M.R.F. 0.03 (529.95 \$ 51030 530.00 6510 **EMPLOYER SHARE SOCIAL SECURITY** 0.84 2,168.16 6510 51040 **EMPLOYEE MED & HOSP INSURANCE** \$ 2,169.00 Total \$ 7,274.00 Reason for Request: Salary and benefit split journal entries for the Grant programs were completed in January and requesting funds from the General Fund Special Accounts and Insurance to cover Regular Salaries (only for Probation and Court Services), I.M.R.F., Social Security, and Health Insurance. Department He Activity Chief Financial Officer (optional) \*\*\*\*Please sign in blue ink on the original form\*\*\*\* Finance Department Use Only Budget Journal # \_\_\_\_\_ Acctg Period Entered By/Date Released & Posted By/Date

FIN-2/13/24 CB-2/13/24

#### DuPage County, Illinois BUDGET ADJUSTMENT Effective January 22, 2024

From:	5000			From		AS EMER RENT ASSIST Junting Unit Name	T FUND		
Accounting Unit	Company #	Sub-Account	Title		Amount		ept Use Only e Balance After Transfer	Date of Balance	B/S Fund
		300-ACCBUIL		1.			4 548,000,00		5000-9110
1770	53820		GRANT SERVICES	\$	226,000.00	T, 1 17, 000,00	1,510,000		3000-9110
			Total	\$	226,000.00				
					US TREA	AS EMER RENT ASSIS	T FUND		
To:	5000	-		To: C	ompany/Accoun	ting Unit Name			
Accounting	Company #						ept Use Only e Balance	Date of	
Unit	Account	Sub-Account	Title		Amount	Prior to Transfer	After Transfer	Balance	H/S Fund
1770	54107		SOFTWARE	\$	108,000.00	0	108,000,00	2/2/24	5000-9110
1770	53807		SUBSCRIPTION IT ARRANGEMENTS	\$	118,000.00	0	118,000.00	2/2/24	5000-9110
R	Reason for Rec	quest:	Total  Budgeting for required software to be used in the ERA2	\$ program	226,000.00				
								7-1-	24
	Activity		ERA2 (optional) ****Please sign in blue lnk on		Financial Officer	JM.		Date A	ry'
r			Finance Department Use On		ginal form:				i
F	iscal Year Z	4 Budget )	ournal # Acctg Period	Ψ					
ε	ntered By/Da	nte	Released & Posted	By/Da	te,				

FIN - 2/13/24 CB - 2/13/24

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DuPage County, Illinois BUDGET ADJUSTMENT Effective May 3, 2023

ANIMAL SERVICES 1100 From: Company/Accounting Unit Name Company # Finance Dept Use Only Accounting Available Balance Date of Sub-Account Unit Account Title Amount Prior to Transfer After Transfer Balance 1300 52320 977.07 2,261.07 MEDICAL/DENTAL/LAB SUPPLIES 716.00 1300 53410 105.93 93 RENTAL OF MACHINERY & EQUIPMNT 105.00 1300 53810 **CUSTODIAL SERVICES** 32 00 108.57 0.57 1300 53370 REPAIR & MTCE OTHER EQUIPMENT 108.00 1300 54120 **AUTOMOTIVE EQUIPMENT** 151.10 0.10 \$ 151.00 300.00 108.00 51050 1300 FLEXIBLE BENEFIT EARNINGS 192.00 Total \$ 1,304.00 ANIMAL SERVICES To: 1100 To: Company/Accounting Unit Name Company # Finance Dept Use Only Accounting Available Balance Date of Unit Sub-Account Account Title Prior to Transfer Amount After Transfer Balance 1300 53110 1/26/24 WORKERS COMPENSATION INSURANCE 1,272.00 0 \$ 1,272.00 1300 52270 0 32.00 MAINTENANCE SUPPLIES \$ 32.00 1/26/24 1300 1300 1300 1300 \$ Total 1,304.00 Reason for Request: FY23: Transfer funds to cover final FY23 Workman's Comp and kennel maintenance expenses Activity Chief Financial Officer (optional) \*\*\*\*Please sign in blue ink on the original form\*\*\*\* Finance Department Use Only Budget Journal #\_ Acctg Period Entered By/Date Released & Posted By/Date

AS - Discharge FIN/CB- 2/13/24

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ASIL

FY23

DuPage County, Illinois BUDGET ADJUSTMENT Effective May 3, 2023

						ANIMAL SERVICES		_	
From:	Company #	7.		From: Company/Accounting Unit Name					
	Company #					Finance D	ept Use Only		
\ccounting						Availab	e Balance	Date of	
Unit	Account	Sub-Account	Title		Amount	Prior to Transfer	After Transfer	Balance	
1300	50010	-	OVERTIME	\$	386.00	386.92	0.92	1/26/2	
1300	50040		PART TIME HELP	\$	522,00	522.27	0.27	1/26/2	
1300	51010		EMPLOYER SHARE I.M.R.F.	\$	4,290.00	4,290.34	0.34	1/26/2-	
1300	51030		EMPLOYER SHARE SOCIAL SECURITY	\$	2,972.00	2,972.42	0.42	1/26/24	
1300	51040		EMPLOYEE MED & HOSP INSURANCE	\$	1,278.00	1,278.69	0.69	1/26/2	
1300	51050		FLEXIBLE BENEFIT EARNINGS	\$	108.00	300.00	192.00	1/26/2	
			Total	\$	9,556-00				
To:	1100			TouC		ANIMAL SERVICES			
	Company#	-		10: 0	mpany/Accoun	ting Unit Name			
						Finance De	ept Use Only		
Counting	Account	Sub-Account	litte		07 <b>4</b> 030040000040		e Balance	Date of	
		Sub-Account			Amount	Prior to Transfer	After Transfer	Balance	
1300	50000		REGULAR SALARIES	\$	9,188.00	(11,696.35)	(2,508.39)	1/26/2	
1300	50050		TEMPORARY SALARIES	\$	368.00	(367.37)	0.63	1/24/29	
1300				-					
1300				-					
1300									
1300							V		
			Total	\$	9,556.00				
	Reason for Req	uest:							
		E	723: Transfer funds to correct FY23 Personnel expense	line bala	nces				
		- 1							
		- 1					1		
		1					1		
							1		
		1							
								1-2/0-2	
				рераг	ment Head	$\Delta M$		Dațe	
					(	M			
	Activity			Chief F	inancial Officer	- V		Date	
		(0	ptional)						
			****Please sign in blue ink on	the orig	inal form****				
	7	2	Finance Department Use Or	lly					
	iscal Year	Budget Jou	rnal # Acctg Period						
119									
	ntered By/Date		Released & Poster						

AS - Discharge FIN/CB - 2/13/24

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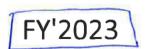
FY23

DuPage County, Illinois BUDGET ADJUSTMENT Effective May 3, 2023

From:		==		From:	Company/Acco	ANIMAL SERVICES unting Unit Name		*
Accounting	Company #						ept Use Only le Balance	Date of
Unit	Account	Sub-Account	Title		Amount	Prior to Transfer	After Transfer	Balance
1300	52280		CLEANING SUPPLIES	\$	40 00	40.40	0.40	1/26/24
1300	53090		OTHER PROFESSIONAL SERVICES	\$	33.00	33.37	0.37	1/26/24
1300	53806		SOFTWARE LICENSES	\$	10.00	10.65	0.65	1/26/24
1300	53807		SOFTWARE MAINT AGREEMENTS	\$	9.00	9.41	0.41	1/26/24
1300	53830		OTHER CONTRACTUAL EXPENSES	\$	21.00	21.70	0.70	1/26/24
1300								
			Total	\$	113.00			
						ANIMAN SCOURSES		
To:	1100			To: Co	mpany/Account	ANIMAL SERVICES		
	Company #	-						
Accounting							ept Use Only e Balance	D-1
Unit	Account	Sub-Account	Title		Amount	Prior to Transfer	After Transfer	Date of Balance
1300	50000		REGULAR SALARIES	Ś	113.00	(11,696.39)	(11,583,39	1/26/24
1300								The state of
1300								
1300								
1300								
1300								
			Total	\$	113.00			
,	Reason for Req	· ·	FY23: Transfer funds to correct FY23 Personnel expense l	line balan	ces			
	Activity	ī	optional)  ****Please sign in blue ink on	Chief Fi	nancial Officer	OW	\	Date Date
			Finance Department Use On	iv				
FI	scal Year 2	S Budget Jo		×				
Er	ntered By/Dat	e	Released & Posted	Bv/Date				

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AS - Discharge FIN/CB-2/13/24



DuPage County, Illinois BUDGET ADJUSTMENT Effective October, 2022

From:	1400 Company #			From:	Company/Acco	DRUG COURT unting Unit Name		<b>→</b> 55
ccounting	Company #					Availab	ept Use Only le Balance	Date of
Unit	Account	Sub-Account	Title		Amount	Prior to Transfer	After Transfer	Balance
5930	51040		EMPLOYEE MED & HOSP INSURANCE	\$	176.00	1,766.85	1,590.85	1/24/2
		ļ,	Total	\$	176.00			
						DRUG COURT		_
To:	1400 Company #	3		To: Con	npany/Account	ting Unit Name	O	
ccounting							ept Use Only le Balance	Date of
Unit	Account	Sub-Account	Title		Amount	Prior to Transfer	After Transfer	Balance
5930	51000		BENEFIT PAYMENTS	\$	176.00	(175.87)	0.13	1/24/24
				+				
			-					
					475.00			
,	Reason for Requ	uest:	Total	\$	176.00			
	,,,,,,		Need to transfer funds to cover benefit payout shortages	for Drug	Court budget f	or FY'2023.		
		L						
				Departn	ment Head	M		1-22-24 Date
	Activity	- <del>(</del> (	optional)  ****Please sign in blue ink on th		nancial Officer	4		Date
Γ			Finance Department Use Onl					
F	iscal Year 2	Budget Joi	urnal # Acctg Period					
	ntered By/Dat		Released & Posted	200-200000				

JPS - 2/6/24 FIN/CB - 2/13/24

B

DuPage County, Illinois BUDGET ADJUSTMENT Effective January 22, 2024

From:	1000 Company#	a.		From:	Company/Acco	JAIL OPERATIONS unting Unit Name		20	
Accounting						Availabl	pt Use Only e Balance	Date of	54046
Unit	Account	Sub-Account	Title	_	Amount	Prior to Transfer	After Transfer	Balance	B/S Fund
4410	51080		WEARING APPAREL REIMBURSEMENT	\$	2,100.00	19,241.00	17,14.00	1/26/24	1000-9100
							•		
				ļ. —					
			Total	\$	2,100.00				
To:	1000 Company #	11		To: Co	mpany/Accoun	JAIL OPERATIONS ting Unit Name		-	
Accounting	company #						pt Use Only Balance	Date of	
Unit	Account	Sub-Account	Title		Amount	Prior to Transfer	After Transfer	Balance	B/S Fund
4410	51060		CELL PHONE STIPEND	\$	2,100.00	(2,046.79)	53,21	1/26/24	1000-9100
			Total	\$	2,100.00				
F	Reason for Req	970	Budget transfer is necessary for cell phone stipend due to	o overtim	e shifts		- 0	7.	
	Activity	° (	(optional) ****Please sign in blue ink on	Chief F	inancial Officer	M	_	JZWA	Ĭ
F	iscal Year 2	3 Budget to	Finance Department Use On	ly					
	ntered By/Da			By/Date					

JPS-2/6/24 FIN/CB-2/13/24

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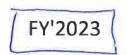
DuPage County, Illinols BUDGET ADJUSTMENT Effective October, 2022

NEUTRAL SITE CUSTODY EXCHANGE

From:		-		From: Company/Accounting Unit Name						
Accounting	Company #						ept Use Only e Balance			
Unit	Account	Sub-Account	Title		mount	Prior to Transfer	After Transfer			
5920	50080		SALARY & WAGE ADJUSTMENTS	\$	2,777.00	6,718.00	3,941,00	1/16/		
			Total	\$	2,777.00					
				1		L SITE CUSTODY EXC	HANGE			
То	1400 Company #	-		To: Com		ting Unit Name	INNOE	-		
ccounting						Availabl	ept Use Only e Balance	_		
Unit	Account	Sub-Account	Title	Α	mount	Prior to Transfer	After Transfer	Tierra		
5920	50000		REGULAR SALARIES	\$	1,639.00	(1,638.49)	0.51	1/16/2		
5920	50040		PART TIME HELP	\$	1,138.00	(1,137,70)	0.36	1/16/2		
				-				-		
			Total	\$	2,777.00		I	1		
	Reason for Rea	quest:								
			Transfer covers deficits in Regular Salaries and Part-Time	e Help for F	Y 23					
		ı		Depart	M	11	1/14/24	4		
	Activity		(optional) ****Please sign in blue ink on t		nancial Officer					
		UE20	Finance Department Use O	nly				-		
	Fiscal Year 2	S Budget Jo	ournal # Acctg Period							
	Entered By/Da	te	Released & Poste	d By/Date_						
1								ŧ.		

JPS - 2/6/24 FIN/CB-2/13/24

B



DuPage County, Illinois BUDGET ADJUSTMENT Effective October, 2022

Counting   Count   C	From	: 1000 Company #	_		From		ATION & COURT SER ounting Unit Name	VICES	=
Signature   Sign			Sub Account	Tinle		A	Availabl	e Balance	Date of
Total \$ 13,946.00  To: 1000  Company # Finance Dept Use Only Available balance  Prior to Transfer of funds to cover FY'2023 salary overages.  Total \$ 13,946.00  Provided Financial Officer  Coptional)  Total \$ 13,946.00  Provided Financial Officer  Chief Financial Officer  Coptional)  Finance Dept Use Only Available balance Prior to Transfer   After Transfer   A	Offic	Account	Sub-Account	Title	T				Balance
To: 1000 Company # To: 1000 Company # To: 1000 Company # Account Sub-Account Title Amount Prior Transfer, After Transfer Balance 6100 50010 OVERTIME \$ 4,833.00 (4,832.93) O. 67 U.25% 6100 50040 PART TIME HELP \$ 9,113.00 (7,112.19) O. 81 U.25%  Total \$ 13,946.00  Reason for Request:  Transfer of funds to cover FY'2023 salary overages.  Transfer of funds to cover FY'2023 salary overages.  Finance Department Head  Other Financial Officer  Date of Salance Prior Transfer, After Transfer Balance Prior Transfer Balance	6100	53410		RENTAL OF MACHINERY & EQUIPMNT	\$	13,946.00	136,409.94	122,463.44	1/29/2
To: 1000 Company #  Accounting Unit Account Sub-Account Title Amount Prior to Transfer, After Transfer Balance 6100 50010 OVERTIME \$ 4,833.00 (4,832.93) O. 67 U.25% 6100 50040 PART TIME HELP \$ 9,113.00 (7,112.19) O. 81 U.25%  Total \$ 13,946.00  Reason for Request:  Transfer of funds to cover FY'2023 salary overages.  Transfer of funds to cover FY'2023 salary overages.  Finance Department Head  Optional)  ****Please sign in blue ink on the original form****  Finance Department Use Only					$\vdash$				
To: 1000 Company #  Accounting Unit Account Sub-Account Title Amount Prior to Transfer, After Transfer Balance 6100 50010 OVERTIME \$ 4,833.00 (4,832.93) O. 67 U.25% 6100 50040 PART TIME HELP \$ 9,113.00 (7,112.19) O. 81 U.25%  Total \$ 13,946.00  Reason for Request:  Transfer of funds to cover FY'2023 salary overages.  Transfer of funds to cover FY'2023 salary overages.  Finance Department Head  Optional)  ****Please sign in blue ink on the original form****  Finance Department Use Only									
To: 1000 Company # Finance Dept Use Only Available Balance Balance  Accounting Unit Account Sub-Account Title Amount Prior to Transfer, After Transfer Balance  6100 50010 OVERTIME \$ 4,833.00 (4,832.93) O. O. V. 1)2.9/2  6100 50040 PART TIME HELP \$ 9,113.00 (7,112.19) O. 81 1/29/2  Total \$ 13,946.00  Reason for Request:  Transfer of funds to cover FY'2023 salary overages.  Total Chief Financial Officer  (optional)  Finance Dept Use Only Available Balance Date of Balance Prior to Transfer, After Transfer Balance Balance Only Activity  Chief Financial Officer  Date of Balance Date of Balance Chief Financial Officer  Date of Balance Date of Balance Chief Financial Officer  Date of Balance Chief Finance Department Head  1-29-20 Date of Balance Chief Financial Officer  Date of Balance Chief Finance Department Head  1-29-20 Date of Balance Chief Finance Department Head  1-29-20 Date of Balance Chief Financial Officer  Date of Balanc				Total	\$	13,946.00			<u> </u>
Company # Finance Dept Use Only Accounting Unit Account Sub-Account Title Amount Prior to Transfer, After Transfer Balance 6100 50010 OVERTIME \$ 4,833.00 (4,832.93) O. 07 1/25/6 6100 50040 PART TIME HELP \$ 9.113.00 (7,112.19) O. 81 1/29/2  Total \$ 13,946.00  Reason for Request:  Transfer of funds to cover FY'2023 salary overages.  Department Head Officer  Chief Financial Officer  (optional)  ****Please sign in blue ink on the original form****  Finance Department Use Only						PROBA	ATION & COURT SERV	/ICES	4
Account Sub-Account Title Amount Prior to Transfer, After Transfer Salance 6100 50010 OVERTIME \$ 4,833.00 (4,832.93) O. O. V. 1)29/2 6100 50040 PART TIME HELP \$ 9,113.00 (7,112.19) O. 81 1/29/2    Total \$ 13,946.00	To:				To: (	Company/Account		at Lice Only	
Unit Account Sub-Account Title Amount Prior to Transfer, After Transfer Balance 6100 S0010 OVERTIME \$ 4,833.00 (4,332.93) O. O. O. U.29/2 6100 S0040 PART TIME HELP \$ 9,113.00 (9,112.19) O. 81 1/29/2  Total \$ 13,946.00  Reason for Request:  Transfer of funds to cover FY'2023 salary overages.  Department Head Optional Officer  Chief Financial Officer  Chief Financial Officer  Date  Transfer of funds to cover FY'2023 salary overages.	Accounting								Date of
Activity  PART TIME HELP  S 9,113.00 (9,112.19) ©. 81 1/29/2  Total S 13,946.00  Reason for Request:  Transfer of funds to cover FY'2023 salary overages.  Department Head  Chief Financial Officer  Date  The please sign in blue ink on the original form****  Finance Department Use Only	_	Account	Sub-Account	Title		Amount			Balance
Total \$ 13,946.00  Reason for Request:  Transfer of funds to cover FY'2023 salary overages.  Department Head  Chief Financial Officer  Optional)  Finance Department Use Only	6100	50010		OVERTIME	\$	4,833.00	The second secon		1/29/24
Activity  Chief Financial Officer  (optional)  Please sign in blue ink on the original form****  Finance Department Use Only	6100	50040		PART TIME HELP	\$	9,113.00	(9,112.19)	0.81	1/29/24
Activity  Chief Financial Officer  (optional)  Please sign in blue ink on the original form****  Finance Department Use Only									
Activity  Chief Financial Officer  (optional)  Please sign in blue ink on the original form****  Finance Department Use Only									
Activity  Department Head  Chief Financial Officer  (optional)  ****Please sign in blue ink on the original form****  Finance Department Use Only				Total	\$	13,946.00			
Activity  Chief Financial Officer  Optional)  ****Please sign in blue ink on the original form****  Finance Department Use Only		Reason for Req	uest:						
Activity  Chief Financial Officer  (optional)  ****Please sign in blue ink on the original form****  Finance Department Use Only				Transfer of funds to cover FY'2023 salary overages.					
Activity  Chief Financial Officer  (optional)  ****Please sign in blue ink on the original form****  Finance Department Use Only								_	
Activity  Chief Financial Officer  (optional)  ****Please sign in blue ink on the original form****  Finance Department Use Only			u.						1-29-2024
(optional)  ****Please sign in blue ink on the original form****  Finance Department Use Only					Depa	rtment Head	$\mathcal{L}_{M}$	1	10 81
Finance Department Use Only		Activity	=				-		Date
02	r					nai form****			
- Contract		Fiscal Year 2	3 Budget le	·	У				
Entered By/DateReleased & Posted By/Date					By/Da	te			

JPS-2/6/24 FIN/CB-2/13/24

B

DuPage County, Illinois BUDGET ADJUSTMENT Effective October, 2022

From:	5000 Company #	-		From: 0		PPORTIVE HOUSING Junting Unit Name	GRANT	-,1
Accounting		RDG				Availab	ept Use Only le Balance	Date of
Unit	Account	Sub-Account	Title	/	Amount	Prior to Transfer	After Transfer	Balance
1760	51040		EMPLOYEE MED & HOSP INSURANCE	s	1,212.00	13,529.57	12,317.27	1/16/24
			Total	s	1,212,00			<u> </u>
					IDHS SU	PPORTIVE HOUSING	GRANT	
To:	5000 Company #			To: Com		ing Unit Name		
ccounting	, , , , ,						ept Use Only e Balance	Date of
Unit	Account	Sub-Account	Title	А	mount	Prior to Transfer	After Transfer	Balance
1760	51000		BENEFIT PAYMENTS	s	1,212.00	(1,211.67)	0.33	1/16/24
				-				
			Total	Ś	1,212.00			
F	Reason for Requ	iest:						
			Budget transfer to account for FY23 year-end compensate	ed absense	s expense acc	rual entry.		
		L		Departm	епу неад			16/24 Data
	Activity				ancial Officer			[[7]
		(	optional)  ****Please sign in blue ink on	the origina	l form****			
			Finance Department Use Onl					
Fi	scal Year 2	S Budget Jos	urnal # Acctg Period					
Er	ntered By/Date		Released & Posted I	By/Date				

HS-2/6/23 FIN/CB-2/13/23

A

FYZ3

DuPage County, Illinois BUDGET ADJUSTMENT Effective May 3, 2023

From	1200 Company #	-		Fron	n: Company/Acci	AINTENANCE & CAPI punting Unit Name	TAL	
ccounting Unit	Account	Sub-Account	Tive			Availab	ept Use Only le Balance	Date of
		Judinecount	Title		Amount	Prior to Transfer	After Transfer	Balance
2040	53010		ENGINEERING/ARCHITECTURAL SVC	\$	18,210.00	131,499.00	113,289.00	1/18/24
				-				
				-				
			Total	\$	18,210.00			
To:	1200			To: C	MA ompany/Accoun	INTENANCE & CAPIT	TAL	
	Company #		٠		ompany, nocoun		ept Use Only	
counting		water transfer and the second					e Balance	Date of
Unit	Account	Sub-Account	Title		Amount	Prior to Transfer	After Transfer	Balance
2040	54110		EQUIPMENT AND MACHINERY	\$	18,210.00	(18,209,69)	0.31	1/18/24
				1				
			Total	\$	18,210 00			
F	Reason for Requ	Ti	ransfer monies for Clear Loss Prevention, Inc. Amount hade whole for FY23. This was for additional cameras in	originali various	y coded to a diff areas at the Duf	nrant line, now con lage Care Center	recting line to be	
		L	and the second s					1-18-
	Activity	(0)	ptional) ****Please sign in blue ink on		inancial Officer	Jug		Date Oate
Γ	2104	271	Finance Department Use Onl					
Fis	scal Year 23	Budget Jour	rnal # Acctg Period					
En	itered By/Date		Released & Posted	By/Date				

HS-2/6/24 FIN/CB-2/13/24

6

#### DuPage County, Illinois BUDGET ADJUSTMENT Effective January 22, 2024

From: _	1200			-		ADMINISTRATION		-	
(	Company #	-		Fron	i: Company/Acco	ounting Unit Name			
ccounting							ept Use Only		
Unit	Account	Sub-Account	Title		Amount	Prior to Transfer	e Balance	Date of	
2000	50080	0		1.			After Transfer	Balance	B/S Fur
2000	30080	0	SALARY & WAGE ADJUSTMENTS	\$	3,300.00	44,825,00	41,525.00	1/30/24	1200-910
				-					
$\overline{}$				-					
			Total	\$	3,300.00				
To:	1200			-		ADMINISTRATION		4	
_	ompany #			To: C	ompany/Accoun	ting Unit Name			
						Finance De	pt Use Only		
counting Unit	Account	Sub-Account	Title		40.00 0	Available		Date of	
2000	51000	0		1.	Amount	Prior to Transfer	After Transfer	Balance	B/S Fund
			BENEFIT PAYMENTS	\$	3,000.00	(2,854.88)	140.12	1/30/24	1200-9100
2000	51050	0	FLEXIBLE BENEFIT EARNINGS	\$	300.00	(250,00)	50.00	1/30/24	1200-9100
				-					
				-					•
-				_					
			Total	S	3,300.00				
Re	ason for Requ	iest;							
		F	ransfer funds within Care Center's Administration Pay	roll bud	get to "true up"	budget lines for Pa	ayroll categories		
		ľ	where Benefit payments and Flexible benefits are over w	hile Sala	ry &Wages Adju	stments are under-			
							- 1		
							- 1		
		1							
		i_							1901
								a/20	121
			•	Depart	ment Head	11/1	1	9/3-, Date 1/3	27
					Ø 11.4	V		13	0/24
					CV	CC 11			
	Activity	_	;	Chief F	nancial Officer	S. 1			1 1
	Activity	ī	optional)		nancial Officer			Date	( )
	Activity	(6	optional}  ****Please sign in blue ink on t						, ,
	Activity	(0	****Please sign in blue ink on t	the origi		- 1			( 1
Files	7:	3	****Please sign in blue ink on t	the origi					
Flsca	Activity	3	****Please sign in blue ink on t	the origi		7. 11			

DuPage County, Illinois BUDGET ADJUSTMENT Effective January 22, 2024

From	1200			From		CIAL SERVICES DEPAR	TMENT	-	
7.0	Company #	_		rioiii	. company/Acc	outking offit Name			
Accounting							ept Use Only e Balance	. Date of	
Unit	Account	Sub-Account	Title	,	Amount	Prior to Transfer	After Transfer	Balance	8/S Fund
2010	50080	0	SALARY & WAGE ADJUSTMENTS	\$	30,610.00	30,610.00	0	1/30/24	1200-9100
2010	50040	0	PART TIME HELP	\$	2,000.00	27,300,00	25,300.00	1/30/24	1200-9100
				_					
			Total	\$	32,610.00				
					F111.441.5				
To:	1200			To: Co		IAL SERVICES DEPART ting Unit Name	IMENT	911	
	Company #	-							
Accounting							pt Use Only Balance	Date of	
Unit	Account	Sub-Account	Title		Amount	Prior to Transfer	After Transfer	Balance	B/S Fund
2010	50000	0	REGULAR SALARIES	\$	32,610.00	(31,547.23)	1,062.77	1/30/24	1200-9100
			Total	\$	32,610.00				
	Reason for Req	uest:							
	, ,		For the 2023 Budget the Care Center budgeted a 2% CO	LA with	in each departo	nent of the Care Cer	nter on a budget		
		1	line titled Salary and Wage Adjustments as directed. We Wage Adjustments) and Part time help for Financial serv	are tra	nsferring the de	ollars under this cate	gory (Salary and		
			to adjust for shortages due to COLA wages applied.	rces de	partment to its	rightful place under	Regular Salacies		
		1.0						1-	1
				Depart	ment Head			1/30	123
				Depart	ment rieso	W	9	1/20/2	U
	Activity			Chiefr	nancial Officer	<i>-</i>		017	1
	Activity		(optional)	Chief Fi	nancial Officer		8	Date	
			****Please sign in blue ink on t	he origi	nal form****				
Γ			Finance Department Use Only	,					
	iscal Year 2	3	ournal# Acctg Period					1	
ľ	iscal rear	budget /c	Acctg Period					1	
E	intered By/Dat	e	Released & Posted I	3y/Date					
L									

DuPage County, Illinois BUDGET ADJUSTMENT Effective January 22, 2024

From	1200 Company#			From		=			
Accounting Unit		Sub-Account	Title		Amount		ept Use Only e Balance After Transfer	Date of Balance	8/S Fund
2025	50080	0	SALARY & WAGE ADJUSTMENTS	Ś	70,797.00	70,797.00	O CO	1/30/24	1200-9100
2025	50040	0	PART TIME HELP	\$	100,000.00	150,014.43	50,014.43	1/30/24	1200-9100
To:	1200		Total	\$	170,797.00	DINING SERVICES			
Accounting	Company #			10: 0	ompany/Account	Finance De	pt Use Only Balance	Date of	
Unit	Account	Sub-Account	Title		Amount	Prior to Transfer	After Transfer	Balance	B/S Fund
2025	50010	0	OVERTIME	\$	170,797.00	(16i,59b.10)	1,200.90	1/30/24	1200-9100
				+					
			Total	\$	170,797.00				
	Reason for Req		For the 2023 Budget the Care Center budgeted a 2% Co line titled Salary and Wage Adjustments as directed. W Wage Adjustments) for the Dining Services department applied. Also, we are transfering funds within departr categories where Part Time salaries are under and Overt	e are tra to Over nent's P	ansferring the do time to adjust for ayroll budget to	ollars under this cate or the shortages due	gory (Salary and to COLA wages	./5.1	
	Activity	٠.	{optional} ++++Please sign in blue Ink on	Chief F	Inancial Officer	Jul		Date (2)	4
Γ			Finance Department Use Onl	ly					
1	iscal Year 2		ournal# Acctg Period						
E	ntered By/Date	e	Released & Posted	By/Date					

DuPage County, Illinois BUDGET ADJUSTMENT Effective January 22, 2024

From	1200 Company#	-		From	: Company/Acco	LAUNDRY ounting Unit Name		-	
Accounting	Account	Sub-Account	Title			Availabl	ept Use Only le Balance	Date of	
		1		1	Amount	Prior to Transfer	After Transfer	Balance	8/S Fund
2030	50080	0	SALARY & WAGE ADJUSTMENTS	\$	1,200.00	19,855.00	18,655,00	1/30/24	1200-9100
	-	0					100		
				1					
			Total	\$	1,200.00				
						LAUNDRY			
To:	Company #	-		To: Co	mpany/Account	ting Unit Name			
A							pt Use Only		
Accounting Unit	Account	Sub-Account	Title		Amount [		Balance	Date of	100000000000000000000000000000000000000
2030	50010	0		T.		Prior to Transfer	After Transfer	Balance	B/S Fund
2030	50040	0	OVERTIME PART TIME HELP	\$	200,00 700.00	(608.61)	91,39	1/30/24	1200-9100 1200-9100
2030	51050	0	FLEXIBLE BENEFIT EARNINGS	5	300.00	(250.00)	50,00	130/24	
	3,000		PLEATBLE BENEFIT EARNINGS	13	300.00	(232.00)	30,00	1/34/24	1200-9100
		-		$\vdash$					
				-					
				-					
			Total	S	1,200.00				
,	Reason for Regi		For the 2023 Budget the Care Center budgeted a 2% CO line titled Salary and Wage Adjustments as directed. We Wage Adjustments) for the Laundry department to its rig for shortages due to COLA wages applied.In addition we a	are tra htful pl	nsferring the do ace under Overt	illars under this cate time and Part time S	gory (Salary and Salaries to adjust		
	Activity	1-	optional)  ****Please sign in blue ink on ti		nancial Officer	M		1/3-/ Date 20/1	25
Г			Finance Department Use Only						
F	iscal Year 2	3 Budget Jo	urnal # Acctg Period						
E	ntered By/Date		Released & Posted E	y/Date	-				

DuPage County, Illinois BUDGET ADJUSTMENT Effective January 22, 2024

F=04	1300			_		NURSING SERVICES		2	
Fron	n:1200 Company #	-		Fron	n: Company/Acco	ounting Unit Name		•	
Accounting	Account	Sub-Account	Title		**********	Availabl	ept Use Only e Balance	Date of	
2050	50080	0		T.	Amount	Prior to Transfer	After Transfer	Balance	B/S Fund
2050	50000	0	SALARY & WAGE ADJUSTMENTS	\$	522,000.00	522,000.00	0.0 4:0 1	1/30/2	1200-9100
2030	30000		REGULAR SALARIES	Š	291,000.00	1,253,118,10	962,719,10	1/30/24	1200-9100
			Total	\$	813,000.00	-			1
				***		NURSING SERVICES			
То	Company #			To: Co	ompany/Account	ing Unit Name			
Accounting							pt Use Only Balance		
Unit	Account	Sub-Account	Title		Amount	Prior to Transfer	After Transfer	Date of Balance	B/S Fund
2050	50010	0	OVERTIME	Ś	715,000.00	(712,159.61)	2,840.39	1/30/24	
2050	50040	0	PART TIME HELP	s	8,000.00	(7,287.86)	712.14	1/30/24	1200-9100
2050	51000	0	BENEFIT PAYMENTS	s	90,000.00	(87,758,04)	2,241.96	1/30/24	1200-9100
				+					
				-					
			Total	\$	813.000.00				
	Reason for Requ		or the 2023 Budget the Care Center budgeted a 2% Co	OLA with	in each departm	ant of the Care Con	to bustood		
		V	ine titled Salary and Wage Adjustments as directed. W Nage Adjustments) for the Nursing department to Over NSO, we are transfering funds within department's Pay	e are tra time to : roll bud	nsferring the do adjust for the sh get to "true up"	llars under this cate, ortages due to COLA budget lines for Pa	gory (Salary and		
		Į,	where Overtime, Part Time help and Benefits are over, w	hile Regi	ılar səlaries are u	inder.			
		,L=						1/33/	120
				рерап	ment Head	$\gamma_{M}$	ī	Date 7	xu
	Activity	_		Chief Fi	nancial Officer	V		70	.
		(0	optional) ****Please sign in blue ink on	the origi	nal form****				
Γ	7	2	Finance Department Use Onl	γ					
F	iscal Year	Budget Jou	rnal # Acctg Period						
Ε	ntered By/Date		Released & Posted	By/Date			_		

#### DuPage County, Illinois BUDGET ADJUSTMENT Effective January 22, 2024

From:	1200 Company#	_		From		AB & THERAPY SERV ounting Unit Name	ICES	#!	
Accounting Unit	Account	Sub-Account	Title		Amount		ept Use Only e Balance After Transfer	Date of Balance	B/S Fund
2060	50080	0	SALARY & WAGE ADJUSTMENTS	Ś	7,000.00	31,613.00	24,613,00	1/30/24	1200-9100
				Ť	7,000,00		The second in	1501	1200-3100
				-					
				-					
		- X	Total	\$	7,000.00				
						5			
					REHA	AB & THERAPY SERVI	CES		
To:	1200	_		To: Co	mpany/Account	ting Unit Name			
	Company #								
Accounting							pt Use Only Balance		
Unit	Account	Sub-Account	Title		Amount	Prior to Transfer	After Transfer	Date of Balance	B/S Fund
2060	51000	0	BENEFIT PAYMENTS	s	7,000.00	16,825.75	174.25	1/30/24	1200-9100
			SERGITI PATRICATS	-	7,000.00	(W, 800, 10)	171.23	1750/21	1200-9100
				-	-				
				-					
				ļ					
			Total	\$	7,000.00			- 1	
,	Reason for Req	E E	Transfer funds within Fore Contac's Sahah S. sharrow	on done !	Describing to the	de contract			
			Transfer funds within Care Center's Rehab & therapy is categories where Benefit payments are over while Salary	&Wages	Payroll budget t Adjustments ar	o "true up" budget	lines for Payroll		
		ĺ	The second secon	a	riajazinienio ai	e under-			
		1							
		L					. (ل	90.	
								1.13	120
				Departi	ment Head	01.1	-	Date /	1/77
						/ W/		1 30	yu
	Activity			Chief Fi	inancial Officer	-		V	V 1
	,	1-	optional)	Cilier	mancial Officer		.,	vare -	
			****Please sign in blue ink on	the orlgi	nal form****				
			Finance Department Use On	lu					
	7	2		.1					
Fi	scal Year 🚣	<u> </u>	urnal # Acctg Perlod						
E-	ntered By/Date		Belgered & Served	n. /n.					
5	of oak		Released & Posted	ay/Date					

DuPage County, Illinois BUDGET ADJUSTMENT Effective January 22, 2024

From				From	n: Company/Acco	ES	<u> </u>		
Accounting Unit	Company #	Sub-Account	Title		Amount		ept Use Only le Balance After Transfer	Date of Balance	B/S Fund
2065	50080	0	SALARY & WAGE ADJUSTMENTS	s	3,000.00	27,888.00			
			SALARY & WAGE ADJUSTINENTS	3	3,000.00	211000.00	27,000,00	1 20 124	1200-9100
		-							
				-					
-	-		<u> </u>						
			Total	s	3,000.00				
				1	5,000.00	t .			
						***************************************			
To:	1200			-		CREATION/ACTIVITIE	:5	*0	
	Company #	-		10: 0	ompany/Account	ing Unit Name			
						Classes De	at the Oak		
Accounting							pt Use Only Balance	Date of	
Unit	Account	Sub-Account	Title		Amount	Prior to Transfer	After Transfer	Balance	B/S Fund
2065	51050	0	FLEXIBLE BENEFIT EARNINGS	s	500.00	(400,00)	100,00	1/30/24	
2065	51070	0	TUITION REIMBURSEMENT	s		12,250,00		Ja-las	1200-9100
	51010		TOTTION REINIBURSEMENT	\$	2,500.00	(2,230,00)	250,00	1/30/24	1200-9100
						7			
				1					
				-					
			Total	5	3,000.00				
	Reason for Req	uest:							
	,,		Transfer funds within Care Center's Recreation/Activit	tler D.	and builded to	WA			
			categories where Flexible Benefit and Tultion reimburser	ment ar	roll budget to	"true up" budget	Ines for Payroll		
		1	The state of the s	ment are	e over while sala	ry & wages Adjustm	ents are under.		
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				оерин	ment ricau	0.11	_ 7	Date	-/.
						/ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		170	YU
	Activity					L   ` ` `		190	
	Activity	7	optional)	Chief Fi	inancial Officer		C	ate ↓	1
		,	****Please sign in blue ink on t	the orlal	nal formation				
-			Thease sign in blue link bill t	ine origi	iiai form				
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DuPage County, Illinois BUDGET ADJUSTMENT Effective January 22, 2024

						SOCIAL SERVICES			
From	: 1200 Company #	-		From	Company/Acc	ounting Unit Name			
Accounting Unit	Account	Sub-Account	t Title		(A)	Availab	ept Use Only e Balance	Date of	
			inge_	_	Amount	Prior to Transfer		Balance	B/S Fund
2070	50080	0	SALARY & WAGE ADJUSTMENTS	Ś	2,000.00	30,288.00	28,288.00	1/30/24	1200-9100
				+-					
L									
			Total	\$	2,000.00	J			
_						SOCIAL SERVICES			
To:	1200 Company #	-		To: Co	mpany/Accoun	ting Unit Name			
Accounting						Finance De	pt Use Only		
Unit	Account	Sub-Account	Title		Amount		Balance	Date of	232 7
2070	51000	0	BENEFIT PAYMENTS	s		(1,747,23)	After Transfer	1/30/24	B/S Fund
		0	DENETIT FATHERY'S	13	2,000.00	(1) 17 1.23	202.11	1130/61	1200-9100
				$\vdash$					
			Total	\$	2,000.00				
,	Reason for Requ	iest:							
			Transfer funds within Care Center's Social Services departments where Republic	rtment F	Payroll budget	to "true up" budget	lines for Payroll		
			categories where Benefit payments are over while Salary	& Wage:	s Adjustments a	ire under.			
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	Activity	-	(optional)	Chief Fin	nancial Officer		C	ate	1.
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Γ		_	Finance Department Use Only	-					
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DuPage County, Illinois BUDGET ADJUSTMENT Effective January 22, 2024

				_		OLUNTEER SERVICE	s	-	
From	1200 Company #	-		From:	Company/Acco	ounting Unit Name			
Accounting							ept Use Only e Balance	Date of	
Unit	Account	Sub-Account	Title		Amount	Prior to Transfer	After Transfer	Balance	B/S Fund
2080	50080	0	SALARY & WAGE ADJUSTMENTS	Ś	7,600.00	16,040.00	8,440,00	1/30/24	1200-9100
			STORY OF TOPOL POSSESSION CITY	1	7,000.00	1010	7. 10.1	1-10	1200-3100
		1		1				1	
				-				-	
								-	
-				-			-	-	
			Total	\$	7,600.00	l			
					V	OLUNTEER SERVICES			
To:	1200			To: Cor	mpany/Account			2.1	
	Company #								
Accounting							pt Use Only Balance	Date of	
Unit	Account	Sub-Account	Title		Amount	Prior to Transfer	After Transfer	Balance	B/S Fund
2080	50000	0	REGULAR SALARIES	s	500.00	(447.88)	52.12	1/30/24	1200-9100
2080	50010	0	OVERTIME	s	2,500.00	(2,365.92)	134.08	1.7 1.4	1200-9100
2080	50040	0	PART TIME HELP	s	4,000.00	13,737.35	262,65	1 1-1	1200-9100
2080	51050		FLEXIBLE BENEFIT EARNINGS	s	600.00	1600.00	6	1. 1.1	1200-9100
				Ť	000 00	(MC)		7.507.	1200-3100
			Total	s	7,600.00				
			10101		7,000.00				
	Reason for Req		See the 2013 Publish the Control of the 2013 Publish the 2013 Publ						
			For the 2023 Budget the Care Center budgeted a 2% CO line titled Salary and Wage Adjustments as directed. We						
			Wage Adjustments) for the Volunteer Services departmen	nt to its r					
			salaries to adjust for the shortages due to COLA wages ap	plied.					
							- 1		
								1 1 10	W217
				Departo	nent Head			1/50/	5,
				Departi	/	LAA		1/20/1	M
	A - 61 - 48		,					6 40	' 1
	Activity	1.5	(optional)	Chief Fir	nancial Officer			Date *	
			****Please sign in blue ink on t	he orlgir	al form****				
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DuPage County, Illinois BUDGET ADJUSTMENT Effective January 22, 2024

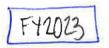
From:	1200			-		NPATIENT PHARMAC	,γΥ	46	
110111.	Company #	_		From	: Company/Acco	ounting Unit Name			
Accounting	Account	Sub-Account			12201000000	Availab	ept Use Only le Balance	Date of	
					Amount	Prior to Transfer	After Transfer	Balance	B/S Fund
2085	50080	0	SALARY & WAGE ADJUSTMENTS	\$	24,595.00	24,545.00	0	1/30/24	1200-9100
2085	53090	0	OTHER PROFESSIONAL SERVICES	\$	13,805.00	23,076.25	9,271.25	1/30/24	1200-9100
			1						
			Total	\$	38,400.00	ļ			
				-		PATIENT PHARMAC	у		
To:	1200 Company #	-		To: Co	mpany/Accoun	ting Unit Name			
Accounting							pt Use Only		
Unit	Account	Sub-Account	Title		Amount	Prior to Transfer	Balance After Transfer	Date of Balance	B/S Fund
2085	50000	0	REGULAR SALARIES	s	33,000.00	(32,481.77)	518.23	1/30/24	
2085	50010	0	OVERTIME	s	1,800.00	(1,760.56)	39.44	1120/24	1200-9100 1200-9100
2085	50040	0	PART TIME HELP	s	3,600.00	(3,598,29)	1.71	1/30/24	1200-9100
			Total	S	38,400.00				
R	leason for Req	uest:							
			For the 2023 Budget the Care Center budgeted a 2% CC	LA with	n each departn	nent of the Care Cer	iter on a budget		
			line titled Salary and Wage Adjustments as directed. Wo Wage Adjustments) for the Pharmacy department to Its	e are tra	nsferring the do	llars under this cate	gory (Salary and		
			to adjust for the shortages due to COLA wages applied.	ngnerur p In additio	nace under Reg on we are trans	ular, Overtime and P ferring the dollars bi	art time salaries		
			used under staffing agency(other proffessional services)	to regula	ar salaries beca	use the positions we	re filled with no		
			need for outside agencies.						
		t						90	
							-0	1/20/2	. 5
			8	weport	ment ricas	111/		Datey	J
					L.	No.		1 201	1
	Activity		And a D	Chief Fi	nancial Officer	.,		Date	
			(optional)  ****Please sign in blue ink on t	he origin	nal form****				
Γ			Finance Department Use Only	,					
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DuPage County, Illinois BUDGET ADJUSTMENT Effective January 22, 2024

From	1200 Company #	-		From	CAF : Company/Acco	NG	25		
Accounting Unit	Account	Sub-Account	nt Title		/#TURNOUS T	Availab	ept Use Only e Balance	Date of	Section :
	2000000				Amount	Prior to Transfer	After Transfer	Balance	B/S Fund
2100	50080	0	SALARY & WAGE ADJUSTMENTS	\$	9,300.00	20,057,00	10,737,00	1/30/24	1200-9100
(1)				_					
-	-								
			Total	\$					
			lotal	2	9,300.00				
To:	1200					ETERIA - 421 BUILDIN	NG		
10.	Company #	-		To: Co	mpany/Account	ing Unit Name			
	Company #					_			
Accounting						Finance De			
Unit	Account	Sub-Account	Title		Amount [	Prior to Transfer	After Transfer	Date of Balance	n/c = -1
2100	50010	0	OVERTIME			(8,073,20)		L/2 /al	B/S Fund
2100				\$	8,200.00	1	126,80	1/50/24	1200-9100
	50020	0	HOLIDAY PAY	\$	200.00	(138,72)	61.28	1/30/24	1200-9100
2100	51000	0	BENEFIT PAYMENTS	\$	900.00	[867,79]	32.21	1/30/24	1200-9100
				_					
			Total	\$	9,300.00				
	Reason for Requ	nact:							
	neason for near	es es	For the 2022 Budget the Core Coates budgeted - 20 Co						
		11	For the 2023 Budget the Care Center budgeted a 2% CO line titled Salary and Wage Adjustments as directed. We	LA WITH	n each departm	ent of the Care Cen	ter on a budget		
		11	Wage Adjustments) for the Cafeteria department to it	rightfu	I nisce under	Overtime Hollday r	gory (Salary and)		
		118	payments salarles to adjust for the shortages due to COLA	wages a	polied.	Overtime, Holiday ;	pay and benefit		
		- 1	,		<b>,</b>		- 1		
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				Departi	ient neau	$\sim$ 14	A C	Date	1
						/ \W	/\	1 20	74
	Activity		S	Chief Fire	ancial Officer			W.'	- 1
		(4	optional)	CINEI FII	ianciai Omcer		U	ate	
			****Please sign in blue ink on t	he orlgin	al form****				
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	7	2	Finance Department Use Only						
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E	ntered By/Date		Released & Posted B	y/Date_			_		
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DuPage County, Illinois BUDGET ADJUSTMENT Effective January 22, 2024

Accounting Unit	Fron	1200 Company #	_		From: (	Company/Acco	HOUSEKEEPING ounting Unit Name		•:	
2035   S0080   O   SALARY & WAGE ADJUSTMENTS   \$ 43,350.00   70,024.00   130,024   1200,9100    Total   S   43,350.00   100		1	Sub-Account	Title	u u	Amount	Availabi	e Balance	1	
Total \$ 43,350.00  Total \$ 43,350.00  Total \$ 43,350.00  HOUSEKEPINS  To: Company/Accounting Unit Name  Finance Days Use Only Available Balance  Sub-Account  Unit Account  2035 \$500.0 0 OVERTIME \$ 25,000.00 (25,555), 444-07 USe International Company  Accounting Unit Name  Finance Days Use of Variable Balance  Account Sub-Account  Title Amount Fitor to Transler  Activity Available Balance  Accounting Unit Name  Finance Days Use of Variable Balance  Accounting Unit Name  Finance Days Use of Variable Balance  Accounting Unit Name  Finance Days Use of Variable Balance  Accounting Unit Name  Finance Days Use of Variable Balance  Account Sub-Account  Total \$ 43,350.00  FLEXIBLE BENEFIT EARNINGS \$ 150.00 (16,415,13) 584-27 1/35/24 1200-9100  Total \$ 43,350.00  FLEXIBLE BENEFIT EARNINGS \$ 150.00 (16,615,00) 1/30/24 1200-9100  Total \$ 43,350.00  FLEXIBLE BENEFIT EARNINGS \$ 150.00 (16,615,00) 1/30/24 1200-9100  Total \$ 43,350.00  FLEXIBLE BENEFIT EARNINGS \$ 150.00 (16,615,00) 1/30/24 1200-9100  Total \$ 43,350.00  FLEXIBLE BENEFIT EARNINGS \$ 150.00 (16,615,00) 1/30/24 1200-9100  Total \$ 43,350.00  FLEXIBLE BENEFIT EARNINGS \$ 150.00 (16,615,00) 1/30/24 1200-9100  Total \$ 43,350.00  FLEXIBLE BENEFIT EARNINGS \$ 150.00 (16,615,00) 1/30/24 1200-9100  Total \$ 43,350.00  FLEXIBLE BENEFIT EARNINGS \$ 150.00 (16,615,00) 1/30/24 1200-9100  Total \$ 43,350.00  FLEXIBLE BENEFIT EARNINGS \$ 150.00 (16,615,00) 1/30/24 1200-9100  Total \$ 43,350.00  FLEXIBLE BENEFIT EARNINGS \$ 150.00 (16,615,00) 1/30/24 1200-9100  Total \$ 43,350.00  FLEXIBLE BENEFIT EARNINGS \$ 150.00 (16,615,00) 1/30/24 1200-9100  Total \$ 43,350.00  FLEXIBLE BENEFIT EARNINGS \$ 150.00 (16,615,00) 1/30/24 1200-9100  FLEXIBLE BENEFIT EARNINGS \$ 150.00 (16,615,00) 1/30/24 1200-9100  Total \$ 43,350.00  FLEXIBLE BENEFIT EARNINGS \$ 150.00 (16,615,00) 1/30/24 1200-9100  FLEXIBLE BENEFIT	2035	50080				-			The second name of the second	
Total \$ 43,350.00  To: Company # Total Sub-Account Title Amount Sub-Account Title Amount Sub-Account Sub-Account Sub-Account Title Amount Sub-Account Sub-Account Sub-Account Title Amount Sub-Account Sub-Account Title Amount Sub-Account Sub-Account Title Amount Sub-Account Sub-Account Sub-Account Title Amount Sub-Account Sub-Acco	1,0,0,0	30000		SALARY & WAGE ADJUSTMENTS	15	43,350.00	10,024.00	26,614,00	1/30/24	1200-9100
To: 1200 Company #  Accounting Unit Account Sub-Account Title Amount Prior Dismarker After Transfer Balance By Use Only Available Balance By Accounting Unit Name  Finance Dept Use Only Available Balance By Account Sub-Account Title Amount Prior Dismarker After Transfer Balance By Fund 1200-9100  2035 50010 0 OVERTIME \$ 25,000.00 (25,555,18) 444-0.77 1250-9100  2035 50020 0 HOUDAY PAY \$ 200.00 (126,10) 73.9.0 1/36/24 1200-9100  2035 51000 0 BENEFIT PAYMENTS \$ 17,000.00 (16,415,73) 584-2.7 1/36/24 1200-9100  2035 51050 0 FLEXIBLE BENEFIT EARNINGS \$ 150.00 (150, cc) O 1/36/24 1200-9100  Total \$ 43,350.00  Resson for Request:  For the 2023 Budget the Care Center budgeted a 2% COLA within each department of the Care Center on a budget line titled Salary and Wage Adjustments as directed. We are transferring the dollars under this category (Salary and Wage Adjustments) for the Housekeeping department to Overtime and Holiday pay to adjust for the shortages due to COLA wages applied Also we are transferring the remaing funds to cover Benefit payments and Flexible benefit earnings shortages.  Activity (optional)  ****Please sign in blue link on the original form***  Finance Department Use Only  Fiscal Year 23  Budget Journal # Accig Period			0		-					
To: 1200 Company #  Accounting Unit Account Sub-Account Title Amount Prior Dismarker After Transfer Balance By Use Only Available Balance By Accounting Unit Name  Finance Dept Use Only Available Balance By Account Sub-Account Title Amount Prior Dismarker After Transfer Balance By Fund 1200-9100  2035 50010 0 OVERTIME \$ 25,000.00 (25,555,18) 444-0.77 1250-9100  2035 50020 0 HOUDAY PAY \$ 200.00 (126,10) 73.9.0 1/36/24 1200-9100  2035 51000 0 BENEFIT PAYMENTS \$ 17,000.00 (16,415,73) 584-2.7 1/36/24 1200-9100  2035 51050 0 FLEXIBLE BENEFIT EARNINGS \$ 150.00 (150, cc) O 1/36/24 1200-9100  Total \$ 43,350.00  Resson for Request:  For the 2023 Budget the Care Center budgeted a 2% COLA within each department of the Care Center on a budget line titled Salary and Wage Adjustments as directed. We are transferring the dollars under this category (Salary and Wage Adjustments) for the Housekeeping department to Overtime and Holiday pay to adjust for the shortages due to COLA wages applied Also we are transferring the remaing funds to cover Benefit payments and Flexible benefit earnings shortages.  Activity (optional)  ****Please sign in blue link on the original form***  Finance Department Use Only  Fiscal Year 23  Budget Journal # Accig Period										
To: 1200 Company #  Accounting Unit Account Sub-Account Title Amount Prior Dismarker After Transfer Balance By Use Only Available Balance By Accounting Unit Name  Finance Dept Use Only Available Balance By Account Sub-Account Title Amount Prior Dismarker After Transfer Balance By Fund 1200-9100  2035 50010 0 OVERTIME \$ 25,000.00 (25,555,18) 444-0.77 1250-9100  2035 50020 0 HOUDAY PAY \$ 200.00 (126,10) 73.9.0 1/36/24 1200-9100  2035 51000 0 BENEFIT PAYMENTS \$ 17,000.00 (16,415,73) 584-2.7 1/36/24 1200-9100  2035 51050 0 FLEXIBLE BENEFIT EARNINGS \$ 150.00 (150, cc) O 1/36/24 1200-9100  Total \$ 43,350.00  Resson for Request:  For the 2023 Budget the Care Center budgeted a 2% COLA within each department of the Care Center on a budget line titled Salary and Wage Adjustments as directed. We are transferring the dollars under this category (Salary and Wage Adjustments) for the Housekeeping department to Overtime and Holiday pay to adjust for the shortages due to COLA wages applied Also we are transferring the remaing funds to cover Benefit payments and Flexible benefit earnings shortages.  Activity (optional)  ****Please sign in blue link on the original form***  Finance Department Use Only  Fiscal Year 23  Budget Journal # Accig Period										
To: 1200 Company #  Accounting Unit Account Sub-Account Title Amount Prior Dismarker After Transfer Balance By Use Only Available Balance By Accounting Unit Name  Finance Dept Use Only Available Balance By Account Sub-Account Title Amount Prior Dismarker After Transfer Balance By Fund 1200-9100  2035 50010 0 OVERTIME \$ 25,000.00 (25,555,18) 444-0.77 1250-9100  2035 50020 0 HOUDAY PAY \$ 200.00 (126,10) 73.9.0 1/36/24 1200-9100  2035 51000 0 BENEFIT PAYMENTS \$ 17,000.00 (16,415,73) 584-2.7 1/36/24 1200-9100  2035 51050 0 FLEXIBLE BENEFIT EARNINGS \$ 150.00 (150, cc) O 1/36/24 1200-9100  Total \$ 43,350.00  Resson for Request:  For the 2023 Budget the Care Center budgeted a 2% COLA within each department of the Care Center on a budget line titled Salary and Wage Adjustments as directed. We are transferring the dollars under this category (Salary and Wage Adjustments) for the Housekeeping department to Overtime and Holiday pay to adjust for the shortages due to COLA wages applied Also we are transferring the remaing funds to cover Benefit payments and Flexible benefit earnings shortages.  Activity (optional)  ****Please sign in blue link on the original form***  Finance Department Use Only  Fiscal Year 23  Budget Journal # Accig Period										
To: 1200 Company #  Accounting Unit Account Sub-Account Title Amount Prior Dismarker After Transfer Balance By Use Only Available Balance By Accounting Unit Name  Finance Dept Use Only Available Balance By Account Sub-Account Title Amount Prior Dismarker After Transfer Balance By Fund 1200-9100  2035 50010 0 OVERTIME \$ 25,000.00 (25,555,18) 444-0.77 1250-9100  2035 50020 0 HOUDAY PAY \$ 200.00 (126,10) 73.9.0 1/36/24 1200-9100  2035 51000 0 BENEFIT PAYMENTS \$ 17,000.00 (16,415,73) 584-2.7 1/36/24 1200-9100  2035 51050 0 FLEXIBLE BENEFIT EARNINGS \$ 150.00 (150, cc) O 1/36/24 1200-9100  Total \$ 43,350.00  Resson for Request:  For the 2023 Budget the Care Center budgeted a 2% COLA within each department of the Care Center on a budget line titled Salary and Wage Adjustments as directed. We are transferring the dollars under this category (Salary and Wage Adjustments) for the Housekeeping department to Overtime and Holiday pay to adjust for the shortages due to COLA wages applied Also we are transferring the remaing funds to cover Benefit payments and Flexible benefit earnings shortages.  Activity (optional)  ****Please sign in blue link on the original form***  Finance Department Use Only  Fiscal Year 23  Budget Journal # Accig Period										
To: 1200 Company #  Accounting Unit Account Sub-Account Title Amount Prior Dismarker After Transfer Balance By Use Only Available Balance By Accounting Unit Name  Finance Dept Use Only Available Balance By Account Sub-Account Title Amount Prior Dismarker After Transfer Balance By Fund 1200-9100  2035 50010 0 OVERTIME \$ 25,000.00 (25,555,18) 444-0.77 1250-9100  2035 50020 0 HOUDAY PAY \$ 200.00 (126,10) 73.9.0 1/36/24 1200-9100  2035 51000 0 BENEFIT PAYMENTS \$ 17,000.00 (16,415,73) 584-2.7 1/36/24 1200-9100  2035 51050 0 FLEXIBLE BENEFIT EARNINGS \$ 150.00 (150, cc) O 1/36/24 1200-9100  Total \$ 43,350.00  Resson for Request:  For the 2023 Budget the Care Center budgeted a 2% COLA within each department of the Care Center on a budget line titled Salary and Wage Adjustments as directed. We are transferring the dollars under this category (Salary and Wage Adjustments) for the Housekeeping department to Overtime and Holiday pay to adjust for the shortages due to COLA wages applied Also we are transferring the remaing funds to cover Benefit payments and Flexible benefit earnings shortages.  Activity (optional)  ****Please sign in blue link on the original form***  Finance Department Use Only  Fiscal Year 23  Budget Journal # Accig Period				Total	6	43 350 00				
To: 1200 Company # Account Sub-Account Title Amount Prior to Transfer Balance Dept Use Only Available Balance Date of Balance Date of Sub-Account Title Amount Prior to Transfer Balance Date of Date				1044	13	43,330.00				
To: 1200 Company # Account Sub-Account Title Amount Prior to Transfer Balance By Fund 1200-9100 2035   S0020   0   OVERTIME   S 26,000.00 (26,555,93)   444.07   180/24   1200-9100 2035   S0020   0   HOUDAY PAY   S 200.00 (126,10)   73.90   1/30/24   1200-9100 2035   S1000   0   BENEFIT PAYMENTS   S 17,000.00 (16,415,73)   584.27   1/30/24   1200-9100 2035   S1050   0   FLEXIBLE BENEFIT FARMINGS   S 150.00 (160,00)   U/30/24   1200-9100 2035   S1050   0   FLEXIBLE BENEFIT FARMINGS   S 150.00 (160,00)   U/30/24   1200-9100 2036   S1050   O   FLEXIBLE BENEFIT FARMINGS   S 150.00 (160,00)   U/30/24   1200-9100 2036   S1050   O   FLEXIBLE BENEFIT FARMINGS   S 150.00 (160,00)   U/30/24   1200-9100 2036   S1050   O   FLEXIBLE BENEFIT FARMINGS   S 150.00 (160,00)   U/30/24   1200-9100 2036   S1050   O   FLEXIBLE BENEFIT FARMINGS   S 150.00 (160,00)   U/30/24   1200-9100 2036   S1050   O   FLEXIBLE BENEFIT FARMINGS   S 150.00 (160,00)   U/30/24   1200-9100 2036   S1050   O   FLEXIBLE BENEFIT FARMINGS   S 150.00 (160,00)   U/30/24   1200-9100 2036   S1050   O   FLEXIBLE BENEFIT FARMINGS   S 150.00 (160,00)   U/30/24   1200-9100 2036   S1050   O   FLEXIBLE BENEFIT FARMINGS   S 150.00 (160,00)   U/30/24   1200-9100 2037   S1050   O   FLEXIBLE BENEFIT FARMINGS   S 150.00 (160,00)   U/30/24   1200-9100 2037   S1050   O   FLEXIBLE BENEFIT FARMINGS   S 150.00 (160,00)   U/30/24   1200-9100 2037   S1050   O   FLEXIBLE BENEFIT FARMINGS   S 150.00 (160,00)   U/30/24   1200-9100 2037   S1050   O   FLEXIBLE BENEFIT FARMINGS   S 150.00 (160,00)   U/30/24   1200-9100 2037   S1050   O   FLEXIBLE BENEFIT FARMINGS   S 150.00 (160,00)   U/30/24   1200-9100 2038   S1050   O   FLEXIBLE BENEFIT FARMINGS   S 150.00 (160,00)   U/30/24   1200-9100 2037   S1050   O   FLEXIBLE BENEFIT FARMINGS   S 150.00 (160,00)   U/30/24   1200-9100 2037   S1050   O   FLEXIBLE BENEFIT FARMINGS   S 150.00 (160,00)   U/30/24   1200-9100 2038   S1050   O   FLEXIBLE BENEFIT FARMINGS   S 150.00 (160,00)   U/30/24   1200-9100 2038   S1050   O   FLEXIBLE BENEFIT FARM							HOUSEKEEPING			
Accounting Unit Account Sub-Account Title Amount First transfer Amount First transfer Amount Available Balance B/S Fund 2035 50010 0 0 OVERTIME 5 25,000.00 (26,555,78) 444,07 150/24 1200-9100 2035 50020 0 HOUDAY PAY 5 200.00 (126,10) 73.90 (130/24 1200-9100 2035 51000 0 BENEFIT PAYMENTS 5 17,000.00 (16,415,73) 584,27 1/30/24 1200-9100 2035 51000 0 FLEXIBLE BENEFIT FARRINGS 5 150.00 (150,00) 0 1/30/24 1200-9100 2036 FOR the 2023 Budget the Care Center budgeted a 2% COLA within each department of the Care Center on a budget line titled Salary and Wage Adjustments for the Housekeping department of victime and Holiday to adjust for the bortages due to (COLA wages applied Also we are transferring the remaing funds to cover Benefit payments and Flexible benefit earnings shortages.  Activity  Chief Financial Officer  Finance Department Use Only Fiscal Year 23 Budget Journal # Accet Period	To:		_		To: Com	pany/Account				
Accounting   Account   Sub-Account   Title   Amount   Prior to Transfer   Balance   B/S Fund		Company #				, , ,				
Unit Account Sub-Account Title Amount Frior to Transfer Date of Balance By Fund 2035 50010 0 OVERTIME 5 26,000.00 (25,555,93 444,07 150/24 1200-9100 2035 50020 0 HOUDAY PAY 5 200.00 (126,10) 73.90 (130/24 1200-9100 2035 51000 0 BENEFIT PAYMENTS 5 17,000.00 (16,415,73) 584,27 130/24 1200-9100 2035 51000 0 FLEXIBLE BENEFIT EARNINGS \$ 150.00 (150,00) 0 Il30/24 1200-9100 2035 51050 0 FLEXIBLE BENEFIT EARNINGS \$ 150.00 (150,00) 0 Il30/24 1200-9100 2035 51050 0 FLEXIBLE BENEFIT EARNINGS \$ 150.00 (150,00) 0 Il30/24 1200-9100 2035 51050 0 FLEXIBLE BENEFIT EARNINGS \$ 150.00 (150,00) 0 Il30/24 1200-9100 2035 51050 0 FLEXIBLE BENEFIT EARNINGS \$ 150.00 (150,00) 0 Il30/24 1200-9100 2035 51050 0 FLEXIBLE BENEFIT EARNINGS \$ 150.00 (150,00) 0 Il30/24 1200-9100 2035 51050 0 FLEXIBLE BENEFIT EARNINGS \$ 150.00 (150,00) 0 Il30/24 1200-9100 2035 51050 0 Il30/24 1200-9100 2035	Accounting									
2035 50020 0 HOLIDAY PAY \$ 200.00 (126.10) 73.90 (130.24 1200.9100 2035 51000 0 BENEFIT PAYMENTS \$ 17,000.00 (16,415.73) 584.27 1/30.24 1200.9100 2035 51050 0 FLEXIBLE BENEFIT EARNINGS \$ 150.00 (150.00) 0 1/30.24 1200.9100  Total \$ 43,350.00  Reason for Request:  For the 2023 Budget the Care Center budgeted a 2% COLA within each department of the Care Center on a budget line titled Salary and Wage Adjustments as directed. We are transferring the dollars under this category (Salary and Wage Adjustments) for the Housekeeping department to Overtime and Holiday pay to adjust for the shortages due to COLA wages applied. Also we are transferring the remaing funds to cover Benefit payments and Flexible benefit earnings shortages.  Activity  (optional)  ****Please sign in blue ink on the original form****  Finance Department Use Only  Fiscal Year 23  **Budget Journal # Accts Period	1100 C 1100 C 100 C 100 C	Account	Sub-Account	Title	۸	mount [				nicross
2035 50020 0 HOUDAY PAY \$ 200.00 (126.10) 73.90 1/36/24 1200-9100 2035 51000 0 BENEFIT PAYMENTS \$ 17,000.00 (16.415.73) 584.27 1/36/24 1200-9100 2035 51050 0 FLEXIBLE BENEFIT EARNINGS \$ 150.00 (150.cc) 0 1/36/24 1200-9100  Total \$ 43,350.00  Reoson for Request:    For the 2023 Budget the Care Center budgeted a 2% COLA within each department of the Care Center on a budget line titled Salary and Wage Adjustments as directed. We are transferring the dollars under this category (Salary and Wage Adjustments) for the Housekeeping department to Overtime and Holiday pay to adjust for the shortages due to COLA wages applied. Also we are transferring the remaing funds to cover Benefit payments and Flexible benefit earnings shortages.    Activity	2035	50010	0						1 le la	
2035 \$1000 0 BENEFIT PAYMENTS \$ 17,000.00 (16,415.73) \$84.27 1/30/24 1200-9100  2035 \$1050 0 FLEXIBLE BENEFIT EARNINGS \$ 150.00 (160.00) 0 1/30/24 1200-9100  Total \$ 43,350.00  Reason for Request:  For the 2023 Budget the Care Center budgeted a 2% COLA within each department of the Care Center on a budget line titled Salary and Wage Adjustments as directed. We are transferring the dollars under this category (Salary and Wage Adjustments) for the Housekeeping department to Overtime and Holiday pay to adjust for the shortages due to COLA wages applied. Also we are transferring the remaing funds to cover Benefit payments and Flexible benefit earnings shortages.  Activity  Chief Financial Officer  Finance Department Use Only  Fiscal Year 23 Budget Journal # Acctg Period					1				Ja lad	
2035 \$1050 0 FLEXIBLE BENEFIT EARNINGS \$ 150.00 (150.00) 0 1/36/24 1200-9100  Total \$ 43,350.00  Reason for Request:  For the 2023 Budget the Care Center budgeted a 2% COLA within each department of the Care Center on a budget line titled Salary and Wage Adjustments as directed. We are transferring the dollars under this category (Salary and Wage Adjustments) for the Housekeeping department to Overtime and Hollady app to adjust for the shortages due to COLA wages applied Also we are transferring the remaing funds to cover Benefit payments and Flexible benefit earnings shortages.  Activity  Chief Financial Officer  Finance Department Use Only  Flacel Year 23 Budget Journal # Acctg Period							1		1/30/24	1200-9100
Total \$ 43,350.00  Reason for Request:  For the 2023 Budget the Care Center budgeted a 2% COLA within each department of the Care Center on a budget line titled Salary and Wage Adjustments as directed. We are transferring the dollars under this category (Salary and Wage Adjustments) for the Housekeeping department to Overtime and Hollday pay to adjust for the shortages due to COLA wages applied. Also we are transferring the remaing funds to cover Benefit payments and Flexible benefit earnings shortages.  Activity  Chief Financial Officer  Chief Financial Officer  Date  Finance Department Use Only  Fiscal Year 23  Budget Journal # Acctg Period					\$	17,000.00		584.27	1/30/24	1200-9100
Reason for Request:    For the 2023 Budget the Care Center budgeted a 2% COLA within each department of the Care Center on a budget line titled Salary and Wage Adjustments as directed. We are transferring the dollars under this category (Salary and Wage Adjustments) for the Housekeeping department to Overtime and Holiday pay to adjust for the shortages due to COLA wages applied. Also we are transferring the remaing funds to cover Benefit payments and Flexible benefit earnings shortages.    Department Head	2035	31050	0	FLEXIBLE BENEFIT EARNINGS	\$	150.00	(150,cc)	O	1/30/24	1200-9100
Reason for Request:    For the 2023 Budget the Care Center budgeted a 2% COLA within each department of the Care Center on a budget line titled Salary and Wage Adjustments as directed. We are transferring the dollars under this category (Salary and Wage Adjustments) for the Housekeeping department to Overtime and Holiday pay to adjust for the shortages due to COLA wages applied. Also we are transferring the remaing funds to cover Benefit payments and Flexible benefit earnings shortages.    Department Head										
Reason for Request:    For the 2023 Budget the Care Center budgeted a 2% COLA within each department of the Care Center on a budget line titled Salary and Wage Adjustments as directed. We are transferring the dollars under this category (Salary and Wage Adjustments) for the Housekeeping department to Overtime and Holiday pay to adjust for the shortages due to COLA wages applied. Also we are transferring the remaing funds to cover Benefit payments and Flexible benefit earnings shortages.    Department Head										
For the 2023 Budget the Care Center budgeted a 2% COLA within each department of the Care Center on a budget line titled Salary and Wage Adjustments as directed. We are transferring the dollars under this category (Salary and Wage Adjustments) for the Housekeeping department to Overtime and Holiday pay to adjust for the shortages due to COLA wages applied. Also we are transferring the remaing funds to cover Benefit payments and Flexible benefit earnings shortages.  Activity  Chief Financial Officer  Thank on the original form***  Finance Department Use Only  Fiscal Year  Budget Journal # Acctg Period				Total	\$	43,350.00				
For the 2023 Budget the Care Center budgeted a 2% COLA within each department of the Care Center on a budget line titled Salary and Wage Adjustments as directed. We are transferring the dollars under this category (Salary and Wage Adjustments) for the Housekeeping department to Overtime and Holiday pay to adjust for the shortages due to COLA wages applied. Also we are transferring the remaing funds to cover Benefit payments and Flexible benefit earnings shortages.  Activity  Chief Financial Officer  Thank on the original form***  Finance Department Use Only  Fiscal Year  Budget Journal # Acctg Period		Reason for Real	uest:							
Activity  Activi		,		For the 2023 Budget the Care Center budgeted a 2% CO	I A within	each departm	ent of the Care Coo	tor on a hudant		
Activity  Activity  Coptional)  Acctig Period  Acctig Period  Acctig Period  Acctig Period  COLA wages Adjustments) for the Housekeeping department to Overtime and Holiday pay to adjust for the shortages due to COLA wages applied. Also we are transferring the remaing funds to cover Benefit payments and Flexible benefit earnings shortages.  Department Head  Chief Financial Officer  Date  The Housekeeping department to Overtime and Holiday pay to adjust for the shortages due to COLA wages applied. Also the shortages due to COLA wages applied. Acctig Period			II.	ine titled Salary and Wage Adjustments as directed. We	are trans	ferring the dol	lars under this cate	Pory (Salary and		
Activity  Chief Financial Officer  Outy 32 17 9  Outy 32 1			- 4	Wage Adjustments) for the Housekeeping department to	Overtime	and Holiday or	ay to adjust for the s	hortages due to		
Activity  Chief Financial Officer  (optional)  ****Please sign in blue lnk on the original form****  Finance Department Use Only  Fiscal Year 23  Budget Journal # Acctg Period				EQUA wages applied. Also we are tranferring the remai	ing funds	to cover Ben	efit payments and	Flexible benefit		
Activity  Chief Financial Officer  Optional)  ****Please sign in blue lnk on the original form****  Finance Department Use Only  Fiscal Year 23 Budget Journal # Acctg Period				2 31101 to 5 23.						
Activity  Chief Financial Officer  Optional)  ****Please sign in blue lnk on the original form****  Finance Department Use Only  Fiscal Year 23 Budget Journal # Acctg Period			Į.							
Activity  Chief Financial Officer  Optional)  ****Please sign in blue lnk on the original form****  Finance Department Use Only  Fiscal Year 23 Budget Journal # Acctg Period										
Activity  Chief Financial Officer  Optional)  ****Please sign in blue lnk on the original form****  Finance Department Use Only  Fiscal Year 23 Budget Journal # Acctg Period									1/3-/2	24
Activity Chief Financial Officer Date  ****Please sign in blue lnk on the original form****  Finance Department Use Only  Fiscal Year 23 Budget Journal # Acctg Period					Departme	ent Head	IM	C	of a land	11
(optional)  ****Please sign In blue lnk on the original form****  Finance Department Use Only  Fiscal Year 23 Budget Journal # Acctg Period							100		1130	10
Finance Department Use Only  Fiscal Year 23 Budget Journal # Acctg Period		Activity	7		Chief Fina	incial Officer			atel	
Finance Department Use Only  Fiscal Year 23 Budget Journal # Acctg Period			(							
Fiscal Year 23 Budget Journal # Acctg Period	-			Please sign in blue ink on tr	ne origina	i torm****				
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From:	1500			From		OOT ADMINISTRATIO	N		
	Company #	_		TOM	COMPANY/MCC	ounting Unit Name			
Accounting							ept Use Only		
Unit	Account	Sub-Account	Title		Amount	Prior to Transfer	e Balance After Transfer	Date of Balance	B/S Fund
3500	50080		SALARY & WAGE ADJUSTMENTS	s	1,200.00	164,998,00		1/22/24	T
- 5500	30000		SADAKI & WAGE ADDOST WEITIS	-	1,200.00	101, 118,00	100, 110.00	1/22/27	1500-9100
				+-					
	<u> </u>								
		-		-					
			Total	\$	1,200.00				
						OT ADMINISTRATION			
To:	1500			To: Co		OT ADMINISTRATION ting Unit Name	V	60	
	Company #	-		10.00	inpany/Account	ting offic Name			
							pt Use Only		
Accounting Unit	Account	Sub-Account	Title		Amount	Available Prior to Transfer,	Balance After Transfer	Date of Balance	B/S Fund
3500	51010	I	EMPLOYER SHARE I.M.R.F.	s	1,200.00	(1.139.43)	60.57	1/22/24	1500-9100
			EWI EO TEN STIMLE MAINT.	1	1,200.00	1112(140)	00,01	12461	1300-9100
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			Total	s	1,200.00				
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F	Reason for Req	T.	Funds needed for year end FY2023						
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	Activity			Chief Ein	nancial Officer	310		Date	1
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			****Please sign in blue ink on t	the origin	nal form***				
ſ		_	Finance Department Use Onl	у					
	scal Year 2	3	urnal # Acctg Period						
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Er	tered By/Date	e	Released & Posted	By/Date		14			

DOT-2/6/24 FIN/CB-2/13/24

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From	: 1500			From:	Company/Acco		ITENANCE/O	PS	-	
	Company #				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
Accounting								ept Use Only e Balance	Date of	
Unit	Account	Sub-Account	Title		Amount	Prior	to Transfer	After Transfer	Balance	8/S Fund
3510	51040		EMPLOYEE MED & HOSP INSURANCE	s	9,400.00	109.	750.51	100,350,5	1/22/24	
						_				
				1					-	
			Tatal	s	0.400.00	_				L
			Total	12	9,400.00					
					DÓ	T MAIN	TENANCE/OF	os.		
To:	1500			To: Co	mpany/Account					
	Company #	-			, ,					
Accounting								pt Use Only Balance	Date of	
Unit	Account	Sub-Account	Title		Amount [	Prior 1	to Transfer	After Transfer	Balance	8/S Fund
3510	51010		EMPLOYER SHARE I.M.R.F.	S	9,400.00	(9:	357.79	42.21	1/22/24	1500-9100
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				-						
			Tatal	\$	0.400.00					
			Total	15	9,400.00					
	Reason for Req	uest:								
			Funds needed for year end FY2023							
									218	,
									1/22/202	
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		th.		7					1 /	
				-					1/22/201	24
				Departr	ment Head	M	-		Date	1
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	Activity	=		Chief Fir	nancial Officer				Date	
		(	optional)  ****Please sign in blue ink on t	he origin	al form****					
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		2	Finance Department Use Only	/						
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DOT - 2/6/24 FN/CB - 2/13/24

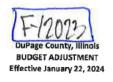
B



From	1500 Company #			From		T MAINTENANCE/O Junting Unit Name	PS	66 66	
Accounting Unit		Sub-Account	Tielo			Availabl	ept Use Only e Balance	Date of	
		Jud-Account	Title		Amount	Prior to Transfer	After Transfer	Balance	B/S Fund
3510	51040	-	EMPLOYEE MED & HOSP INSURANCE	\$	26,000.00	109,750.51	83,750.51	1/22/24	1500-9100
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			Total	5	26,000.00				
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To:	1500			To: Co	mpany/Account			S.	
	Company #	-		10. 00	mpany/Account	ing Onit Name			
						Finance De	pt Use Only		
Accounting		8 9					Balance	Date of	
Unit	Account	Sub-Account	Title	-	Amount	Prior to Transfer	After Transfer	Balance	B/S Fund
3510	50010		OVERTIME	\$	26,000.00	(25,124.84)	875.16	1/22/24	1500-9100
						*			
				-					
			Total	\$	26,000.00				
			Total	12	20,000.00				
	Reason for Requ	uest;							
			Funds needed for year end FY2023						
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		1						JB Late	
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	Activity			Chieff	nancial Officer			× 1	1.
	Activity	1	optional)	Chief Fi	nancial Officer		L	Date	1
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		-	Finance Department Use Only						
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	iscal Year	Budget Jo	urnal # Acctg Period						
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			Noiceased in Poster L	-11 Date.					
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DOT - 2/6/24 FN/CB - 2/13/24

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DOT MAINTENANCE/OPS 1500 From: Company/Accounting Unit Name Company # Finance Dept Use Only Accounting Available Balance Date of Unit Sub-Account Account Title Prior to Transfer After Transfer Balance B/S Fund 3510 50050 100,000.00 122,738.40 22,738.40 1/22/24 1500-9100 TEMPORARY SALARIES 178,000.00 240,050.00 62,050.00 3510 50080 SALARY & WAGE ADJUSTMENTS 50.000.00 113 111 . 48 63.11.48 3510 51000 BENEFIT PAYMENTS Total 328,000.00 DOTMAINTENANCE/OPS 1500 To: Company/Accounting Unit Name Company # Finance Dept Use Only Accounting Available Balance Date of Unit Account Sub-Account Title Prior to Transfer After Transfer Amount Balance B/S Fund 327, 335.12 22/24 1500-9100 3510 50000 664-88 REGULAR SALARIES 328,000.00 Reason for Request: Funds needed for year end FY2023 218 1/22/2024 1/23/24 Department Head Activity Chief Financial Officer (optional) \*\*\*\*Please sign in blue ink on the original form\*\*\*\* Finance Department Use Only \_\_\_ Acctg Period \_ Entered By/Date Released & Posted By/Date\_

DOT-2/6/24 FIN/CB-2/13/24 B

DuPage County, Illinois BUDGET ADJUSTMENT Effective January 22, 2024

From:	1500 Company #			From		OOT ADMINISTRATI ounting Unit Name	ON	-	
Accounting Unit	Account	Sub-Account	Title		Amount		Dept Use Only ble Balance	Date of Balance	9 <i>1</i> 6 5 4
									B/S Fund
3500	54050	0000	TRANSPORTATION INFRASTRUCTURE	\$	251,432.00	11,521,585	11,270,153.00	1/31/24	1500-9100
				_					
				-					
			Total	\$	251,432.00				
T	4500			_		OT ADMINISTRATIO	ON		
To:	1500 Company #			To: Co	ompany/Accoun	tIng Unit Name			
Accounting							lept Use Only ble Balance	Date of	
Unit	Account	Sub-Account	Title		Amount	Prior to Transfer	After Transfer	Balance	B/S Fund
3500	54000	0000	LAND/RIGHT OF WAY	Ś	251,432.00	200,000,00	451,432.00	1/31/24	1500-9100
				+					
			*						
			Total	S	251,432.00				
R	Reason for Requ	U	Inforseen easement costs for the Geneva Road Bridge	e Replacer	nent Project Wh	en the FY 2024 bu	dget was created.		
		11	he new costs are in regards to DuPage County obt istrict of DuPage County in order to move forward on	aining per	rmanent easem	ent rights from th	e Forest Preserve		
		11						1.1	
				Depart	ment Head			Date / 201	4
						CM	1	/31/2024	
	Activity	(0	ptional)	Chief F	inancial Officer			Date	
			****Please sign in blue lnk or	n the origi	nal form****				
	21	L	Finance Department Use Or	nly					
Fis	scal Year	Budget Jou	rnal # Acctg Period						
120	tered By/Date		Released & Poste					- 1	

DOT - 2/6/24 FIN/CB-2/13/24

DuPage County, Illinois BUDGET ADJUSTMENT Effective May 3, 2023

From:	1100 Company #	<b>3</b> 7.		G.I.S.  From: Company/Accounting Unit Name							
Accounting Unit	Account	Sub-Account	Title			Availabl	ept Use Only e Balance	Date of			
		300-Account	litte		Amount	Prior to Transfer	After Transfer	Balance			
2900	53828		CONTINGENCIES	\$	29,057.00	36,000,00	6,943.00	1/16/24			
			Total	\$	29,057.00						
T	4400			_		G.I.S.					
To:	Company #	2		Ta: Cor	mpany/Account						
Accounting							pt Use Only Balance	Date of			
Unit	Account	Sub-Account	Title		Amount	Prior to Transfer	After Transfer	Balance			
2900	51040		EMPLOYEE MED & HOSP INSURANCE	s	29,057-00	(29,056.79)	0.21	1/16/24			
			IN ISTALLAND CITES INSTANCE	Ť	25,037100	1000		TIWIE			
			Total	\$	29,057-00						
	Reason for Req	uest:	To cover Employee Med & Hospital Insurance for GIS en	ployees i	n FY23						
		. Le					0	1/12/202			
				Departr	ment Head	2/11		Date			
	A sale da				L	/ VVV		1171			
	Activity		(optional)		nancial Officer			Date			
Г			****Please sign in blue ink on Finance Department Use On		ai iorm						
- 1	2	2	rinance Department USE On	·y							
F	iscal Year 🚣	Budget Jo	ournal # Acctg Period								

Tech. - 2/6/24 FIN/CB - 2/13/24

DuPage County, Illinois BUDGET ADJUSTMENT Effective January 22, 2024

From:	1000 Company #	-		From	INFO	-			
Accounting							ept Use Only le Balance	Date of	
Unit	Account	Sub-Account	Title		Amount	Prior to Transfer		Balance	B/S Fund
1110	50099		NEW PROGRAM REQUESTS-PERSONNEL	s	5,550 00	216,422.00	210,922.00	1/31/24	1000-9100
			Total	\$	5,550.00	4.			•
To:	1000 Company #			To: Co	INFO ampany/Account	RMATION TECHNOLI ing Unit Name	DGY	8	
ccounting							pt Use Only Balance	Date of	
Unit	Account	Sub-Account	Title		Amount	Prior to Transfer	After Transfer	Balance	B/S Fund
1110	50010		OVERTIME	5	850.00	(841.06)	8.94	1/31/24	1000-9100
1110	50050		TEMPORARY SALARIES	\$	4,700 DQ	(4,670.50)	29.50	1/31/24	1000-9100
				1					
	eason for Requ		Total	\$	5,550.00				
	and the second	1/2-	cover remaining overtime and temporary salary costs	for FY23.					
				Depure		THE	(	/25/2024 Date	1
	Activity	(opti	ional)  ****Please sign in blue ink on t		nancial Officer	1"/		/31/2024 Date	
			Finance Department Use Only					1	
Fise	cal Year 23	Budget Journa	al# Acctg Period						
- I)								- 1	

Tech. - 2/6/24 FIN/CB-2/13/24

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