

FY25

DuPage County, Illinois
BUDGET ADJUSTMENT
Effective January 22, 2024

From: 1000
Company #

COUNTY RECORDER

COUNTY RECORDER
ounting Unit Name

To: 1000
Company #

COUNTY RECORDER

Reason for Request:

To cover the cost of consultant billing for Fiscal 2025.

Department Head

Chief Financial Officer

2-3-2025
Date 2/4/25

Activity

(optional)

Chief Financial Officer

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 _____

FIN - 2/11/25
CB - 2/11/25

FY24

DuPage County, Illinois
BUDGET ADJUSTMENT
Effective January 22, 2024

From: 1600
Company #

STORMWATER MANAGEMENT
From: Company/Accounting Unit Name

Accounting Unit	Account	Sub-Account	Title	Amount	Available Balance		Date of Balance	B/S Fund
					Prior to Transfer	After Transfer		
3000	50000		REGULAR SALARIES	\$ 19,579.00	33,366.43	13,787.43	1/10/25	1600-9100
3000	50040		PART TIME HELP	\$ 20,000.00	25,000.00	5,000.00	1/10/25	1600-9100
3000	50080		SALARY & WAGE ADJUSTMENTS	\$ 30,000.00	60,058.00	30,058.00	1/10/25	1600-9100
Total				\$ 69,579.00				

To: 1600
Company #

STORMWATER MANAGEMENT

Reason for Request

Budget adjustment necessary due to year end employee payouts as allowable by recent changes to the CB policy

~~Department Head~~

Chief Financial Officer

Date

4

Activity

(optional)

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

Fiscal Year 24 Budget Journal # _____ Acctg Period _____

Finance Department Use Only

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SW - 2/4/25
FIN/CB - 2/11/25

FY24

DuPage County, Illinois
BUDGET ADJUSTMENT
Effective October 1, 2024

From: 5000
Company #

IEPA Grants

IEPA Grants

To: 5000
Company #

IEPA Grants

Reason for Request:

The purpose of budget transfer is to cover Regular Salaries, Temporary Salaries, Employer Share I.M.R.F. and Social Security payments that exceeded original budget during the year FY 2024.

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01.14.25
Date
1/14/25
Date

Activity

(optional)

Chief Financial Officer

Date

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

Finance Department Use Only
Fiscal Year 24 Budget Journal # _____ Acctg Period _____
Entered By/Date _____ Released & Posted By/Date _____

SW - 2/4/25
FIN/LB - 2/11/25