

DuPage County, Illinois  
 BUDGET ADJUSTMENT  
 Effective April 1, 2025

From: 5000  
 Company #

US TREAS EMER RENT ASSIST FUND  
 From: Company/Accounting Unit Name

Accounting Unit	Account	Sub-Account	Title	Amount	Finance Dept Use Only Available Balance		Date of Balance
					Prior to Transfer	After Transfer	
1770	50000		REGULAR SALARIES	\$ 5,000.00	22,004.13	17,004.13	5/28/26
Total				\$ 5,000.00			

To: 5000  
 Company #

US TREAS EMER RENT ASSIST FUND  
 To: Company/Accounting Unit Name

Accounting Unit	Account	Sub-Account	Title	Amount	Finance Dept Use Only Available Balance		Date of Balance
					Prior to Transfer	After Transfer	
1770	53807		SUBSCRIPTION IT ARRANGEMENTS	\$ 5,000.00	Ø	5,000.00	5/28/26
Total				\$ 5,000.00			

Reason for Request:

To reclassify FY25 Prepaid Expense to FY26 Expense, amount \$4,800.00, Vendor: Neighborly Software, invoice# 13264.

Department Head

Chief Financial Officer

5/26/26  
 Date  
5/28/26  
 Date

Activity

(optional)

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

Finance Department Use Only

Fiscal Year 26 Budget Journal # \_\_\_\_\_ Acctg Period \_\_\_\_\_

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

HS - 6/2/26  
 FIN/LB - 6/9/26

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

211 ILLINOIS PROGRAM GRANTS

From: 5000  
Company #

From: \_\_\_\_\_  
Company/Accounting Unit Name

Accounting Unit	Account	Sub-Account	Title	Amount	Finance Dept Use Only Available Balance		Date of Balance
					Prior to Transfer	After Transfer	
1765	50000	0000	REGULAR SALARIES	\$ 4,293.00	8,095.76	3,802.76	5/21/26
1765	51010		EMPLOYER SHARE I.M.R.F.	\$ 414.00	781.25	367.25	5/21/26
1765	51030		EMPLOYER SHARE SOCIAL SECURITY	\$ 322.00	619.51	297.51	5/21/26
1765	51040		EMPLOYEE MED & HOSP INSURANCE	\$ 575.00	1,080.83	505.83	5/21/26
1765	52240		PROMOTION MATERIALS	\$ 896.00	2,146.00	1,250.00	5/21/26
				Total	\$ 6,500.00		

211 ILLINOIS PROGRAM GRANTS

To: 5000  
Company #

To: \_\_\_\_\_  
Company/Accounting Unit Name

Accounting Unit	Account	Sub-Account	Title	Amount	Finance Dept Use Only Available Balance		Date of Balance
					Prior to Transfer	After Transfer	
1765	53807		SUBSCRIPTION IT ARRANGEMENTS	\$ 6,500.00	Ø	6,500.00	5/21/26
				Total	\$ 6,500.00		

Reason for Request:

Grant manager confirmed that this subscription cost is allowable. Budget modification is needed to cover for this software cost.



5/21/26  
Date  
3/27/26  
Date

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

Chief Financial Officer \_\_\_\_\_  
Date

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

Finance Department Use Only	
Fiscal Year <u>26</u>	Budget Journal # _____ Acctg Period _____
Entered By/Date _____	Released & Posted By/Date _____

HS - 6/2/26  
FIN/CB - 6/9/26

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