

FY24

DuPage County, Illinois
BUDGET ADJUSTMENT
Effective January 22, 2024

From: 1100
Company #

G.I.S.
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	
2900	53828		CONTINGENCIES	\$ 6,940.00	20,594.00	13,654.00	1/10/25
Total				\$ 6,940.00			

To: 1100
Company #

G.I.S.
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	
2900	50010		OVERTIME	\$ 1,213.00	(1,212.95)	0.05	1/10/25
2900	51040		EMPLOYEE MED & HOSP INSURANCE	\$ 5,727.00	(5,726.16)	0.84	1/10/25
Total				\$ 6,940.00			

Reason for Request:

To cover GIS overtime and employee medical & hospital insurance for FY2024.

Signature on File _____

01/10/2025

Department Head
Signature on File _____

Date

1/15/25

Activity _____
(optional)

Chief Financial Officer

Date

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

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

Tech - 1/21/25
FIN/CB - 1/28/25