

## **Budget Line Item Transfer/Supplemental Appropriation Request**

Department/Office: \_\_\_\_\_ Date \_\_\_\_\_

Authorized Signature: \_\_\_\_\_

Type of Transfer: City Manager, or designee, approval: Line to line, same department   
(Check all that apply) Council approval required: Line to line, different department   
Supplemental appropriation

### Transfer from line item code:

Account Code	Description	Amount
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

### Transfer to line item code:

Account Code	Description	Amount
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

### Purpose/Comments:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### Transfer Approved:

By City Manager or Designee: \_\_\_\_\_ Date: \_\_\_\_\_

Finance Name/Date: Received: \_\_\_\_\_ Processed: \_\_\_\_\_