



**City of Cocoa Budget Adjustment Form FY 2024 -**

SELECT ADJUSTMENT TYPE: \_\_\_\_\_

REQUESTING DEPARTMENT #: \_\_\_\_\_

DATE PREPARED: \_\_\_\_\_

ADJUSTMENT AMOUNT	ACCOUNT NUMBER	PROJECT NUMBER	ACCOUNT NAME	ORIGINAL BUDGET	AMENDED BUDGET	ADJUSTED BUDGET	UNENCUMBERED BALANCE
TOTAL							

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TOTAL							

REASON/JUSTIFICATION FOR ADJUSTMENT:

Council/Board APPROVAL REQUIRED? YES  NO

DATE APPROVED: \_\_\_\_\_

RESOLUTION #: \_\_\_\_\_

*City Council approval is needed for all transfers greater than \$75,000 and transfers between Departments / Funds. All CRA adjustments are required to go their respective boards.*

Date Requestor's Signature \_\_\_\_\_

Date Finance Approval Signature \_\_\_\_\_

Date Finance Director's Signature \_\_\_\_\_

Date Department Director's Signature \_\_\_\_\_

Date Deputy Fin. Director's Signature \_\_\_\_\_

Date City Manager's Signature \_\_\_\_\_

**FINANCE USE ONLY:**

Date Entered: \_\_\_\_\_

Entered By: \_\_\_\_\_

Group #: \_\_\_\_\_