

### LFUCG Budget Amendment Request Form

**Requester:** Gooding,Irene      **Date:** 01/21/2014      **Status:** Division Director Approved      **Amend Nbr:** 5388

**Business Unit:** LFUCG      **Journal Date:** 01/21/2014      **Budget Period:** 2014      **Bid**  **Admin Review**

Personnel, Operating & Capital Accounts

Fund	Dept ID	Section	Account	Description	Amount	Division	Department	Journal ID
1 3300	136101	0001	63122	Appointed Officials	76,000.00	MGR_NA	KATKINS	
2 3300	136101	0001	63511	Pension Contributions	14,060.00	MGR_NA	KATKINS	
3 3300	136101	0001	63615	BP- Life/Health/Dental/Vision	8,990.00	MGR_NA	KATKINS	
4 3300	136101	0001	63621	FICA	4,710.00	MGR_NA	KATKINS	
5 3300	136101	0001	63622	Unemployment Insurance	140.00	MGR_NA	KATKINS	
6 3300	136101	0001	63624	Medicare Expense	1,100.00	MGR_NA	KATKINS	

Revenue Accounts

Fund	Dept ID	Section	Account	Description	Amount	Division	Department	Journal ID
1 3300	136101	0001	46750	Grant Revenue - Other	80,000.00	MGR_NA	KATKINS	
2 3300	136101	0001	45911	Transfer From General Service	25,000.00	MGR_NA	KATKINS	

**Project/Grant Revenue**

**Project/Grant Expenditures**

**Comments:**  
To establish gmt budget for food coordinator Project (BLG\_FOOD\_20140)

**Net Amend Amt:** 0.00

 