## **BUDGET MODIFICATION**

SUPERVISOR'S APPROVAL	DATE		For Office Use Only: Change completed by
Forward processed BUDMOD to:	The FDOM and the TOL secret and the second and	TOL	Date completed
NAME OF ACCT	The FROM's and the TO's must equal to each other  NAME OF ACCT	TO's	
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AMOUNT \$	AMOUNT S	\$	
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BUDGET ACCT NUMBER	BUDGET ACCT NUMBER il job	fund func obj	scc il job
AMOUNT \$	AMOUNT S	\$	
NAME OF ACCT	NAME OF ACCT		
BUDGET ACCT NUMBER	BUDGET ACCT NUMBER _	fund func obj	scc il job
AMOUNT \$	AMOUNT S	\$	

This budget modification form must be completed and sent to the fiscal department in order to have money moved within your budget accounts. A copy of this completed BUDMOD will be forwarded to you or to designated person as completed on this form.