

**Town of Dryden
Budget Modification Request Form**

Department: Court, Highway, Planning, and Fire Districts Date of Request: December 10, 2020

Department Head: _____ Signature: _____

Budget Lines to be Modified: (each request must list two budget lines)		Amount	Reason for Budget Modification: (attach additional documentation if necessary)
Account Number	Account Name	\$	

From:	A9060.8	Medical Ins	-	1,801.88	27 Payrolls in 2020
To:	A1110.102	Court Clerk 1	+	1,801.88	

From:	A9060.8	Medical Ins	-	2,504.21	27 Payrolls in 2020 and raise given after budget
To:	A1110.106	Court Clerk 2	+	2,504.21	

To:	A9060.8	Medical Ins	-	2,111.96	27 Payrolls in 2020
To:	A5010.10	Dpty Supt of Highway	+	2,111.96	

From:	A9060.8	Medical Ins	-	1,346.15	27 Payrolls in 2020
To:	A5010.102	Highway Secretary	+	1,346.15	

From:	B9060.8	Medical Ins	-	2,504.73	27 Payrolls in 2020
To:	B8020.101	Planning Director	+	2,504.73	

From:	B9060.8	Medical Ins	-	1,966.57	27 Payrolls in 2020
To:	B3620.102	Code Enforcement Officer 2	+	1,966.57	

From:	B9060.8	Medical Ins	-	1,429.03	27 Payrolls in 2020
To:	B3620.106	Code Enforcement Officer 1	+	1,429.03	

From:	SF599	Fund Balance	-	0.02	incorrect voucher done in spring 2020
To:	SF3410.403	Varna Fire Contract	+	0.02	

Review and Decision (Bookkeeper/Clerk Use Only)	
Bookkeeper Review: Are funds available as listed above to make the budget modification?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Date: <u>12/7/20</u>	Signature: <u>Amanda Anderson</u>
Town Board Approval: Date of Town Board meeting to be discussed:	<u>12/10/2020</u>
Was the budget modification approved?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Date: <u>12/7/2020</u>	Signature: <u>[Signature]</u>
Give to Town Clerk for Resolution # _____	
return to the Bookkeeper to make the appropriate entries	
Modification Entered: _____	Date: _____ Signature: _____