

**Town of Dryden
Budget Modification Request Form**

Department: Highway

Date of Request: January 12, 2021

Department Head: Rick Young

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:	A2680	INSURANCE RECOVERIES	-	7,693.41	INSURANCE CLAIM TO REPLACE SYMPLEX SYSTEM TO DAVIS- ULMER
To:	A-5132.4	GARAGE CONTRACTUAL	+	7,693.41	

From:	DA-5130.4	EQUIPMENT	-	6,592.00	MOVE FUNDS DONE IN ERROR
To:	DA-5130.2	MACHINERY & EQUIPMENT	+	6,592.00	

From:	DA2680	INSURANCE	-	1,000.00	INSURANCE MONEY TO FIX DAMAGED TRUCK
To:	DA-5130.4	MACHINERY	+	1,000.00	

From:			-		
To:			+		

From:			-		
To:			+		

From:			-		
To:			+		

From:			-		
To:			+		

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>1/13/21</u>	Signature: <u>Amanda Anclusa</u>
Town Board Approval:	Date of Town Board meeting to be discussed: _____
Was the budget modification approved?	Yes _____ No _____
Date: _____	Signature: _____
Give to Town Clerk for Resolution # _____	
return to the Bookkeeper to make the appropriate entries	
Modification Entered:	Date: _____ Signature: _____