



BUDGET AMENDMENT

(Budget amendments apply to the current fiscal year only)

I request the changes noted below in the budget for:

Name of Department Fiscal Year

Requested By:

Name of Transaction Department Department ID

Date: _____

Name of Preparer Phone

SHADED AREAS FOR BUDGET OFFICE USE

USE WHOLE DOLLARS ONLY

PC Bus Unit	Project ID	Department ID	Program	Fund	Account	Account Description	Amount Increase	Amount Decrease	FTE Increase	FTE Decrease
Totals							0	0	0.00	0.00

Notes / Explanations:

Dean or Director of Program Dean or Director of Program Budget Office Date

FOR BUDGET OFFICE USE ONLY

Expense Journal ID: _____ Revenue Journal ID : _____

Date Posted / Initials: _____