

Town of Colchester

FY 18/19

General Fund

~~Budget Transfer~~/Additional Appropriation

Department:

Reason for Request:

Reason for Available Funds:

From:	Account Number	Account Name	Amount
	<input type="text" value="18501-36250"/>	<input type="text" value="Use of G/F Assigned Fund Balance"/>	<input type="text" value="97,601"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>

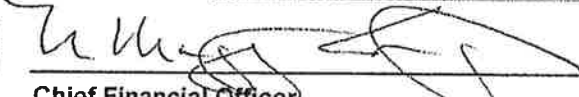
To:	Account Number	Account Name	Amount
	<input type="text" value="18501-50700"/>	<input type="text" value="Transfer to Debt Service Fund"/>	<input type="text" value="97,601"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>

Date Requested


Department Director or Supervisor - Signature

Print Name

Date Reviewed


Chief Financial Officer

Date Approved


First Selectman

Date Approved

Board of Selectmen Clerk

Date Approved

Board of Finance Clerk