

FY 2020/2021

Town of Colchester  
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="62,635"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>

To:	<input type="text" value="18501-50700"/>	<input type="text" value="Transfer to Debt Service Fund"/>	<input type="text" value="62,635"/>
	<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