## **BUDGET ADJUSTMENT**

Date		Location				Responsibility Center Manager President				
^ _		NIT								
ACCOU Fund LfSp		Site Program Subpgm Object			Object	Type Account Name			Amount in \$'s	
INCOME										
EXPENSE										
JUSTIFICATION										
Fisca	al Serv	ices						Board Action Date		
Batcl	n Tran	sfer Number/Reference #				Posted By:		Date:		
							5000 Dj.			