#### **Licking County Master Gardener Volunteers**

#### **BUDGET ADJUSTMENT REQUEST FORM**

Please complete Step 1 below if you would like to increase or decrease your budget or create a new budget line. When completed, email this to the Finance Committee Chairperson, Elaine Boaz at <a href="mailto:elaine@boazplace.com">elaine@boazplace.com</a>

#### Step 1 – Submit Request

Date request submitted		Requestor Name	
Line item Account #		Line item Name	
<b>Current Budget Amount</b>	\$	Requested Increase/Decrease	\$
Reason additional funds	are neede	ed or reason for decrease:	

# **Step 2 - Finance Committee Review**

Date request reviewed	Reviewer Name		
Reviewer comments:			
Finance Committee recommendation:	: Approve	Decline	
Comments:			

### **Step 3 – Executive Committee Action**

Executive Committee decision:	Approve	Decline
Date request actioned	Approver Na	ame

# **Step 4 – Treasurer Action**

Date budget updated	Date budget request filed	
	3-1-1	

Doc #: Form-01 Version-1 Effective Date: 2/1/2017