



JOURNAL ID:

**BUDGET PERIOD:** 2026

TOTAL	-
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DATE \_\_\_\_\_



**REQUEST FOR SUPPLEMENTAL REVENUE**  
CITY OF KANSAS CITY, MISSOURI

DEPARTMENT:

BUSINESS UNIT: **KCMBU**

DATE:

JOURNAL ID: \_\_\_\_\_

LEDGER GROUP: **REVENUE**

<u>FUND</u>	<u>DEPT ID</u>	<u>ACCOUNT</u>	<u>PROJECT</u>	<u>AMOUNT</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
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_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

TOTAL \_\_\_\_\_ -

DESCRIPTION:

\_\_\_\_\_

APPROVED BY:

DATE

APPROVED BY: DEPARTMENT HEAD

DATE

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