

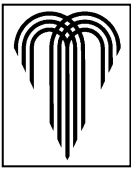


BUSINESS UNIT: KCMBU **DATE:** 4/9/2025 **JOURNAL ID:** _____

[illegible]

DESCRIPTION:

APPROVED BY:	DATE	APPROVED BY: DEPARTMENT HEAD	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
_____	_____	_____	_____