



REQUEST FOR SUPPLEMENTAL REVENUE
CITY OF KANSAS CITY, MISSOURI

DEPARTMENT: Water

BUSINESS UNIT: KCMBU

DATE: 6/22/2021

JOURNAL ID: _____

LEDGER GROUP: REVENUE

Table with 5 columns: FUND, DEPT ID, ACCOUNT, PROJECT, AMOUNT. Contains two rows of data and multiple empty rows.

TOTAL _____

DESCRIPTION:

Horizontal lines for description entry

APPROVED BY: _____ DATE _____

APPROVED BY: DEPARTMENT HEAD _____ DATE _____