## **REQUEST FOR SUPPLEMENTAL REVENUE**

CITY OF KANSAS CITY, MISSOURI

Ψ	DEPARTMENT:					
BUSINES	SS UNIT:	KCMBU	DATE:		JOURNAL ID:	
LEDGER GROUP: F		REVENUE				
	<u>FUND</u>	DEPT ID	ACCOUNT	PROJECT	<u>AMOUNT</u>	
_						
_						
_						
_						
					TOTAL	
					TOTAL	<u> </u>
DESCRIPTION:						
APPROVED BY:		DATE	APPROVED BY: DEPARTMENT HEAD		DATE	