

FL INSTITUTE OF TECHNOLOGY

Temporary Budget Adjustment Form

Initiated By: _____

Approved By: _____

Date: _____

Data Entry Title: _____

Temporary Budget Adjustment

BD04

Line #	Fund	Org	Account	Prog	Actv	Increase	Decrease
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
Subtotal						-	-
Grand Total							-

Explanation:

Please use this form when an adjustment cannot be processed through Finance Self Service.

1.The form is initiated by the administrative assistant (or designated other) who will complete the ORG / Account /

Program / Activity (if applicable) and the amount

2.The Department Head will review and sign as approver

3.Email to David Lyon dlyon@fit.edu for entry to Banner