



OFFICE OF THE CITY CLERK ▪ CITY OF BINGHAMTON

Phil Strawn, City Council President

Leighton Rogers, City Clerk

BOARD OF ESTIMATE & APPORTIONMENT

AGENDA

City Hall, 38 Hawley Street, Binghamton, NY

Wednesday, February 2, 2022

Approval of Minutes: Request to approve the minutes from the Board of Estimate & Apportionment meeting held on January 26, 2022

NEW BUSINESS

Budget Transfer: \$198.09 from budget line A1430.54432 (Medical Services) to budget line A1430.54701 (Travel & Training) and \$2,633.55 from budget line A1430.54432 (Medical Services) to budget line A1430.51000 (Personal Services) to cover overdrawn 2021 budget accounts



E + A / FINANCE

CITY OF BINGHAMTON

City Hall, 38 Hawley Street, Binghamton, NY 13901 607-772-7005

REQUEST FOR TRANSFER OF FUNDS

Transfer requests of \$2500 or less must be approved by the Comptroller.
Transfer requests over \$2500 and not in excess of \$10,000 must be approved by Board of E&A and Chair of Finance Committee.
Transfer requests in excess of \$10,000 must be approved by City Council.

City Comptroller
c/o Board of Estimate and Apportionment
38 Hawley Street
Binghamton, NY 13901


Date: 1/27/2022

I respectfully request the below described transfer of funds due to the following reasons:

To cover overdrawn 2021 budget accounts

From Budget Line (No. and Title)	To Budget Line (No. and Title)	Total Transfer Amount
A1430 54432 Medical Services	A1430 54701 Travel & Training	\$198.09
A1430 54432 Medical Services	A1430 51000 Personal Services	\$2,633.55

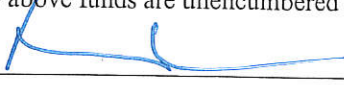
I do hereby certify that the funds will not be needed in the budget line from which I am requesting this transfer to be made.

Signature: 

Date: 1/20/22

OFFICE USE ONLY

I hereby certify that the above funds are unencumbered and available for Transfer. Certified by the Comptroller.

Signature: 

Date: 1/31/22

I hereby certify that the above described funds have been transferred, in accordance with the Code of the City of Binghamton Chapter 9, *Appropriations*. Certified by the Treasurer.

Signature: _____

Date: _____

Transfer of funds APPROVED / DENIED on _____. Certified by the Secretary of the Board of Estimate and Apportionment.

Signature: _____

Date: _____

Transfer of funds reviewed by the Binghamton City Council Finance Chair. Recommendations to be attached.

Signature: _____

Date: _____