



REQUEST FOR SUPPLEMENTAL REVENUE
CITY OF KANSAS CITY, MISSOURI

DEPARTMENT: Health

BUSINESS UNIT: KCMBU

DATE: 6/18/2024

JOURNAL ID: _____

LEDGER GROUP: REVENUE

	<u>FUND</u>	<u>DEPT ID</u>	<u>ACCOUNT</u>	<u>PROJECT</u>	<u>AMOUNT</u>
<u>25</u>	2730	500001	479740	G50244825	\$2,997,334.00
25	2730	500001	479880	G50501925	202,830.00

TOTAL 3,200,164.00

DESCRIPTION:

APPROVED BY:	DATE	APPROVED BY: DEPARTMENT HEAD	DATE
Tanner Owens	6/18/2024		



Health

JOURNAL ID:

BUDGET PERIOD: 2025

TOTAL	<u>3,200,164.00</u>
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DATE _____

6/18/2024