



REQUEST FOR SUPPLEMENTAL REVENUE
CITY OF KANSAS CITY, MISSOURI

DEPARTMENT: Health

BUSINESS UNIT: #REF! DATE: 8/6/2022 JOURNAL ID: _____

LEDGER GROUP: REVENUE

Table with 5 columns: FUND, DEPT ID, ACCOUNT, PROJECT, AMOUNT. Row 1: 2480, 500001, 472700, G50507923, \$125,050.00. Subsequent rows are empty.

TOTAL 125,050.00

DESCRIPTION:

Accepting and approving a \$120,050.00 grant award agreement from the University of Kansas for injury preventions and control research; estimating and appropriating \$120,050.00 in the Health Grants Fund; and designating requisitioning authority.

APPROVED BY: James Sturdevant DATE: 8/6/2022 APPROVED BY: DEPARTMENT HEAD DATE: _____