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Bristol
CONNECTICUT
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Comptroller's Office | Phone: 860.584.6130 | Fax: 860.584.3827

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TOWN AND CITY CLERK
BRISTOL, CT

September 23, 2020

Mayor Ellen Zoppo-Sassu
Chairman
City Hall
111 North Main Street
Bristol, Connecticut 06010

Dear Mayor Zoppo-Sassu:

At the regular Board of Finance Meeting held on **September 22, 2020** the following motion was passed and referred to a Joint Meeting of the City Council and Board of Finance for action:

"To make additional appropriations of $720,055 within the Equipment Building Sinking Fund as of June 30, 2020."

Sincerely,

Diane M. Waldron
Board of Finance Clerk

cc: Therese Pac

City of Bristol
111 North Main Street
Bristol, CT 06010
www.bristolct.gov

CITY OF BRISTOL
BOARD OF FINANCE AGENDA REQUEST FORM

To: Board of Finance Commissioners

From: Comptroller's
(Requesting Department)

Date: September 16, 2020
(Submission Date)

For the Agenda September 21, 2020 Board of Finance Meeting
(Date of Meeting)

This request is for:
(Please check the type of request and list in whole dollar amounts)

X Additional Appropriation $ 720,055

X Transfer from Contingency $ 1,270,055

☐ Transfer(s) $

☐ Grant $

☐ Carry-over(s) $

☐ Other

Approval:

This request was approved by the _____
(governing Board of your department)

at its meeting held on _____.
(date)

Diane M Waldron 9/16/2020
(Department Head's signature)

All requests to appear on the Board of Finance meeting agenda for consideration must be submitted to Jodi McGrane in the Comptroller's Office by 10:00 a.m. Monday of the preceding week of the meeting. Board of Finance Meetings are held on the fourth Tuesday of each month at 5:30 p.m. in the Council Chambers.

Board of Finance Agenda Request Form

Reason for request:
To allocate funds to set aside reserves for future budget years as of 6/30/20 as described below:
-Transfer $720,055 to replenish Sinking Fund for FY2021 capital and an additional appropriation to Sinking Fund Contingency.
-Transfer $550,000 to Health Benefits Fund to replenish reserves

Additional Appropriation(s) and/or Appropriation(s) complete the following:

Account		Account Name	Amount
1011018-490001	Rev	Sinking Fund – Transfer In GF	$720,055
1018106-589000	Exp	Sinking Fund Contingency	$720,055

Transfer(s) complete the following:

From:	0018106-589000 General Fund Contingency	**To:**	0018108-591100 Operating Transfer Out Special Revenue	**Amount:**	$720,055
From:	0018106-589000 General Fund Contingency	**To:**	0018108-591500 Operating Transfer Out – Internal Service	**Amount:**	$550,000
From:		**To:**		**Amount:**	

Grants:
Total Amount: Grant $_____

City Share $_____ _____ %

Federal/State Share $_____ _____ %

Carry-overs list the following:

Account	Account Name	Amount