



111 North Main Street | Bristol, Connecticut 06010 | Phone: 860.584.6130

December 20, 2023

Mayor Jeffrey Caggiano
Chairman
City Hall
111 North Main Street
Bristol, Connecticut 06010

RECEIVED
2023 DEC 20 PM 2:55
TOWN AND CITY CLERK
BRISTOL, CT

Dear Mayor Caggiano:

At the regular Board of Finance Meeting held on **December 19, 2023** the following motion was passed and referred to a Joint Meeting of the City Council and Board of Finance for action:

“To transfer \$15,000 from the General Fund Contingency account for Unemployment.”

Sincerely,

A handwritten signature in black ink that reads 'Diane M. Waldron'.

Diane M. Waldron
Board of Finance Clerk

cc: City Clerk



**CITY OF BRISTOL
BOARD OF FINANCE AGENDA REQUEST FORM**

To: Board of Finance Commissioners

From: Comptroller's
(Requesting Department)

Date: 12/11/23
(Submission Date)

For the 12/19/23 Board of Finance Meeting Agenda
(Date of Meeting)

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

- Additional Appropriation \$ _____
- Transfer from Contingency \$ 15,000
- Transfer(s) \$ _____
- Grant \$ _____
- Carry-over(s) \$ _____
- Other

Approval:

This request was approved by the _____
(governing Board of your department)
at its meeting held on _____.



(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: FY2024 Budget has already been depleted for unemployment. More funding may be needed, as unemployment costs are unpredictable. This is just an estimate.

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

Account	Account Name	Amount
_____	_____	_____
_____	_____	_____
_____	_____	_____

Transfer(s) complete the following:

From: 0018106-589000 Contingency	To: 0018102-521200 Unemployment	Amount: \$15,000
From: _____	To: _____	Amount: _____

Grants:

Total Amount: Grant \$ _____

City Share \$ _____ %

Federal/State Share \$ _____ %

Carry-overs list the following:

Account	Account Name	Amount
_____	_____	_____
_____	_____	_____
_____	_____	_____