

# City of Revere: New Special Revenue Fund Form

## Section To Be Completed by Department

**Please use this form to receive a new special revenue fund number for external funding sources (ex. grants or earmarks).**

Administrator Name: \_\_\_\_\_

Department: \_\_\_\_\_

Date: \_\_\_\_\_

Department Head Signature: \_\_\_\_\_

Grant Name: \_\_\_\_\_

Amount (\$): \_\_\_\_\_

Grantor Name: \_\_\_\_\_

Effective/Start Date: \_\_\_\_\_

Grantor CFDA# (Federal Grants Only): \_\_\_\_\_

End Date: \_\_\_\_\_

Grantor EIN (Entity Identification Number, for Federal Grants Only): \_\_\_\_\_

Funding Source (Federal, Pass thru Federal, State, Pass thru State, if Other provide details): \_\_\_\_\_

Matching funds required? **(Yes / No)** (If Yes, please fill out the next page of this form.)

Are salary/wages and fringe benefits an eligible expense? **(Yes / No / Not Applicable - No grant-funded positions in respective department)**

If Yes, please note the dollar amount: \_\_\_\_\_

If No, did you discuss with the grantor if these costs are eligible? **(Yes / No)**

Is this a reimbursable or prepaid grant? **(Reimbursable / Prepaid)**

Expenditure reporting frequency: **(Weekly / Monthly / Quarterly / Annually / As Needed Basis / No Reporting)**

Required Documentation Attached:

Fully Signed Contract: **(Yes / No)**

Documentation on Eligible Uses: **(Yes / No)**

Scope of Work:

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Comments:

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Please fill out the below to set up the budget in Munis.  
Five lines are left blank if you want to have an object code with a specific account name.

<u>Account Name per Munis</u>	<u>Expense Description</u>	<u>Object Code per Munis</u>	<u>Budget Amount</u>
PERMANENT SALARIES		510100	\$
OTHER SALARIES		510101	\$
SALARY - OVERTIME		510900	\$
PURCHASE OF SERVICES		520000	\$
CONTRACTED SERVICES		525000	\$
OTHER CHARGES & EXPENDITURES		570000	\$
CAPITAL OUTLAY		580000	\$
NEW EQUIPMENT		587100	\$
			\$
			\$
			\$
			\$
			\$
		Total	\$

### Section To Be Completed by Auditing

Fund Number: \_\_\_\_\_

Date Created: \_\_\_\_\_

Created By: \_\_\_\_\_

### Section To Be Completed by Budget

BUC Posted By: \_\_\_\_\_

Approved By: \_\_\_\_\_

Date: \_\_\_\_\_

Comments: \_\_\_\_\_  
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