



Funding Verification Form

EVENT #: 12587

TITLE: Long Term Disability

TOTAL FUNDING AMOUNT:

AMOUNT
\$204,070

FUNDING SOURCE:

BUDGET YR	FUND	DEPARTMENT	ACCOUNT	ACTIVITY
2027	621 – RISK MANAGEMENT	9808 - DISABILITY	52225 – PURCHASED INSURANCE	N/A

NOTES

Fiscal Impact Statement: The funding source 621.9808.52225 supports this expenditure.