

**Fairfield County Auditor Finance Office  
Request for Project Number**

Project Number Assigned (Auditor use only)

**Project Title:** \_\_\_\_\_

Project Description: \_\_\_\_\_

Project Initiation Date: \_\_\_\_\_ Project Completion Date: \_\_\_\_\_

Budgeted Expenses: \$ \_\_\_\_\_ Budgeted Revenues: \$ \_\_\_\_\_

List fund(s) and account number(s) associated with project. Attach an additional sheet if necessary.

<u>Fund</u>	<u>Revenue</u>	<u>Expense (if salary, include all accounts)</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Are there any identifying numbers for this project? For example, a CFDA Number for Federal grants. If so, please list those numbers and a description, if available.

**Type of Project** *(check one)*

Federal grant	_____	State grant	_____
Building maintenance	_____	Construction project	_____
Other	_____		_____

(Description)

**Requested by:** \_\_\_\_\_ **Date requested:** \_\_\_\_\_

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

**Deputy Auditor Signature:** \_\_\_\_\_ **Date Established:** \_\_\_\_\_