

# Budget Amendment Request Form

For Budget Office Use Only	
_____ Court _____ Non-Court	
FY _____	Seq. No. _____
Approved by: _____	Date: _____

Date of Request: 9-28-10

From: Juvenile Probation  
(Department Name / Contact Name / Phone)

Budget Account to Receive Budget Amendment: \_\_\_\_\_ New       Existing

Project Code to Receive Amendment: \_\_\_\_\_ New      \_\_\_\_\_ Existing

**TO Account Information:**

Line Item Number	Line Item Description	Project Code	Amount
<u>041-6460-643-6401</u>	<u>Consultants</u>		<u>41,500</u>

**FROM Account Information:**

Line Item Number	Line Item Description	Project Code	Amount
<u>018-6420-641-4010</u>	<u>Regular Full Time Salaries</u>		<u>41,500</u>

FROM Total:	<b>\$0.00</b>
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**Purpose for Request:**

To offset the cost for teachers in the JJAEP.



\_\_\_\_\_  
 Juvenile Board Chairman



\_\_\_\_\_  
 Elected Official / Department Head