

Budget Amendment Request Form

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

Date of Request: August 8, 2011

From: Sheriff's Office/Chuck Ruckel /5109
(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>036-5013-640.65-38</u>	<u>Drug Forfeiture Fund - Lease Vehicles</u>	_____	<u>\$10,125.00</u>

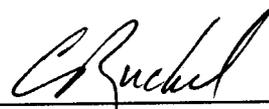
FROM Account Information:

Line Item Number	Line Item Description	Project Code	Amount
<u>036-0000-251.00-00</u>	<u>Sheriff's Drug Forfeiture Fund</u>	_____	<u>\$10,125.00</u>
_____	_____	_____	_____
_____	_____	_____	_____

FROM Total:	\$10,125.00
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Purpose for Request:

**To reallocate funds from Drug Forfeiture Fund for (5) lease vehicles for Narcotic Deputies.
 Beginning July 1, 2011 thru September 30, 2011**



 Elected Official / Department Head