

Budget Amendment Request Form

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

Date of Request: June 18, 2012

From: Sheriff's Office/Chuck Ruckel /5109
(Department Name / Contact Name / Phone)

Budget Account to Receive Budget Amendment: _____ New x 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>\$17,325.00</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>\$17,325.00</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

FROM Total:	\$17,325.00
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Purpose for Request:

To reallocate funds from Drug Forfeiture Fund for (2) lease vehicles from May 2012 and (6) lease vehicles beginning June 1, 2012 thru September 30, 2012.



 Elected Official / Department Head