

Budget Amendment Request Form

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

Date of Request: August 18, 2015

From: Auditor/Jeff May x4641
(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>510-8302-645.65-83</u>	<u>Animal Care</u>		<u>\$21,713.00</u>
TO Total:			\$21,713.00

FROM Account Information:

Line Item Number	Line Item Description	Project Code	Amount
<u>510-0000-251.00-00</u>	<u>Fund Balance</u>		<u>\$21,713.00</u>
FROM Total:			\$21,713.00

Purpose for Request:

To budget unbudgeted funds in fund balance from prior years.

Jeff May

Elected Official / Department Head