BUDGET AMENDMENT REQUEST

(for budget transfers and/or unbudgeted expenses)

Date			6/12/2024					
Parent Fund			General Fund					
Department/Division BoCC Date			Board of County Commissioners/ Facilities/ CCJ					
	the follow	ing transf	for he made	for the reason(s) sta	tod:			
Requestion		ount	er de made	Cost	ieu.			
						5	,	TDD
		OM 60,052	Fund 00101	Center 010000001	Account 5998010	Project 0000000	Area	TBD
	\$	60,052	00101	010000001	5998010	0000000	00	0000000
	Φ.							
TOTAL	\$	60,052						
		ount		Cost				
		0	Fund	Center	Account	Project	Area	TBD
	\$		00101	010525001	5991020	0000000	00	0000000
	Ψ	00,002	00101	010323001	3331020	0000000	- 00	0000000
TOTAL	¢	60,052						
Request Bo R, Installation	ard appro on of gene Managen	ve 1) Acc erator at C nent and 2	ept and exe central Coun 2) CIP amen	o as necessary) cute Modiciation No. ity Jail, between Polk idment, Budget resol	County and the	State of Flori	da, Diviior	ns of
Department	/Division	Director						
Recommended or not recommended by Reason				(Budget & Management Services)				Date)
APPROVED				tv Management				

Requesting Department or Division: FORWARD TO BUDGET & MANAGEMENT SERVICES

(Date)