

BUDGET AMENDMENT REQUEST

(for budget transfers and/or unbudgeted expenses)

Date 3/17/2025
Parent Fund 10151 Special Revenue Grant
Division Emergency Management

Request for the following transfer be made for the reason(s) stated:

Amount FROM	Fund	Cost Center	Account	Project	Area	TBD	
				0000000	00	0000000	
				0000000	00	0000000	
				0000000	00	0000000	
				0000000	00	0000000	
				0000000	00	0000000	
				0000000	00	0000000	
				0000000	00	0000000	
\$							
TOTAL	\$ -						

Amount TO	Fund	Cost Center	Account	Project	Area	TBD	Board Date: 4/1/2025
\$ 1,559,000	11191	300525009	3349001	0000000	00	0000000	
\$ 1,559,000	11191	300525009	5666000	0000000	00	0000000	
				0000000	00	0000000	
				0000000	00	0000000	
				0000000	00	0000000	
				0000000	00	0000000	
				0000000	00	0000000	
\$							
TOTAL	\$ 3,118,000						

JUSTIFICATION (attach additional back-up as necessary) Please see attached

Revision originated by: Holly Newton, Financial Administrator

Division Director _____

Recommended or not recommended by _____
(Budget & Management Services) (Date)

Reason _____

APPROVED / NOT APPROVED
Board of County Commissioners/County Management _____
(Date)

Requesting Department or Division: **FORWARD TO BUDGET & MANAGEMENT SERVICES**
(Rev. 09-07)