BUDGET AMENDMENT REQUEST

(for budget transfers and/or unbudgeted expenses)

Date		10/13/2025					
Parent Fund		10150 Special Revenue Grants Fund					
Department/Division		Fire Rescue					
BoCC Date		11/18/2025					
Request for the following transfer be made for the reason(s) stated:							
	Amount		Cost				
	FROM	Fund	Center	Account	Project	Area	TBD
						7 5	
					*		
	\$						
TOTAL	\$ -						
	Amount		Cost				
	ТО						
		Fund	Center	Account	Project	Area	TBD
	\$ 4,146,822	11225	290521117	3312001	0000000	00	0000000
	\$ 1,382,274 \$ 5.529.096	11225	290521117	3810001	0000000	00	0000000
ľ	\$ 5,529,096 \$	11225	290521117	5359000	0000000	00	0000000
	J.				0000000	- 00	0000000
· '		 					
							
TOTAL	\$ 11,058,192	 					
		_	e pococcany)				
JUSTIFICATION (attach additional back-up as necessary) See attached Agenda Backup and Resolution							
See allacin	eu Ayenua backu	p and Resolut	1011				
				2.32			
$\Delta = (-1, 0)$							
Department/Division Director							
		- Surviva	w (vu)		10/19/2	. 5	
Recommended or not recommended by							(5.1.)
							(Date)
Reason							
	/ NOT APPROVE						
Board of County Commissioners/County Management							
							(Date)

Requesting Department or Division: FORWARD TO BUDGET & MANAGEMENT SERVICES