CIP BUDGET AMENDMENT REQUEST

Date		10/24/2023						
Parent Fund Division		Fire Impact Fees Fire Rescue						
								epartment
Request for	the following trans	sfer be made for	the reason(s) stat	ed:				
	Amount		Cost					
	FROM	Fund	Center	Account	Project	Area	TBD	
	\$ 1,061,000	12261	290524069	5998140	0000000	00	0000000	
	\$							
	\$							
	\$							
	\$							
	\$							
	\$							
TOTAL								
TOTAL	\$ 1,061,000		0 1	T	1	<u> </u>		
	Amount		Cost					
	ТО	Fund	Center	Account	Project	Area	TBD	
	\$ 1,061,000	12261	290524128	5666000	0000000	00	000000	
	\$							
	\$							
	\$				+			
	\$							
	\$							
	\$							
TOTAL	\$ 1,061,000		<u>'</u>	<u> </u>		•	-	
udgeted ar	nd ordered in FY2			· /				
		X Hezedean Smith Hezedean Smith						
		Fire Cheif	· · · · · · · · · · · · · · · · · · ·					
Department Director Hez		Hezedean Sm	Hezedean Smith, Fire Chief					
Recommen	ded or not recomn		Budget & Managen	nent Services\		/г	Date)	
Reason		(L	daget & Managen	ient dervices)		(-	Jate)	
.545011								
	O / NOT APPROV							
oard of C	ounty Commissi	oners/County	Management _			/г)ate)	
						(1	IAIH I	

Requesting Department or Division: FORWARD TO BUDGET & MANAGEMENT SERVICES