Blount County Government Budget Amendment Request

		FY 24-25	Department	: <u>Education Ca</u>	pital
			Account:	<u> 177-91300</u>	
Type	of Amendment: (check one)				
	Transfer (no overall change to adopted bu	dget)			
	Decrease (reducing adopted budget due to unforeseen effect on "revenue" or "expense") Increase (raising adopted budget due to unforeseen effect on "revenue" or "expense")				
	Adjustment (correction to adopted budge	et due to "grant aw	vard" or "budgetary ad	ljustment")	
	If an Increase or Decrease, a memo expl	aining the need or	purpose MUST accon	npany amendmer	nt form
	Account Number		Description		Amount
то	177-91300-570700	Building Impro	vements		\$4,949,000
	177-91300-530400	Architect Fees			\$49,500
				TOTAL	\$4,998,500
				•	
	Account Number		Description		Amount
FROM					
				TOTAL	\$0
Explana		tor the WBHS CTE	: Kenovation Project.		
Krisi	ti Y ates 6/17/24				
Signature of Official/Department Head/Date			Signature of County May	or/Date	

*All requests requiring committee approval are due to Sr. Financial Analyst's Office by noon on the Tuesday before the Budget Committee Meeting.