



# Blount County Budget Committee Memo

TO:

FROM:

DATE:

RE:

1. Proposal (what is the new item/service being requested) \_\_\_\_\_

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2. Current Operations (how are operations without the request and impact if not funded)

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3. Impact if funded (provide summary if the request is approved) \_\_\_\_\_

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<b>Budget Impact</b>	
Original Budget	
Amendment Impact	
Proposed Revised Budget	

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Signature from Department Head/Elected (or designee)