

**Blount County Government
Budget Amendment Request**

FY 22-23

Department: Highway Department

Account: _____

Type of Amendment: (check one)

- Transfer** (no overall change to adopted budget)
- 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 budget due to "grant award" or "budgetary adjustment")

*****IF an Increase or Decrease, a memo explaining the need or purpose MUST accompany amendment form*****

	Account Number	Description	Amount
TO	131-99100-55900	Transfer to Other Funds	2,120,000.00
TOTAL			2,120,000.00

	Account Number	Description	Amount
FROM	131-00000-489900	Other	2,120,000.00
TOTAL			2,120,000.00

Explanation: _____



 Signature of Official/Department Head/Date

 Signature of County Mayor/Date

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