Blount County Government Budget Amendment Request

Department: Other General Admin FY 17-18 Account: 101-51900 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 101-51900-500399 **Contracted Services** 100,000.00 **TOTAL** 100,000.00 Account Number Description Amount FROM 101-489900-0 Other/Use of Fund Balance 100,000.00

Explanation: to establish budget for ADA services performed by DLZ, per contract

100,000.00

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.