

**Blount County Government
Budget Amendment Request**

FY 22-23

Department: Highway
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	131-62000-533000	Lease Payments	7,012.45
TOTAL			7,012.45

	Account Number	Description	Amount
FROM	131-00000-497000	Insurance Recovery	7,012.45
TOTAL			7,012.45

Explanation: To appropriate funds received from the insurance company to cover damages to the Highway Dept
2008 Chevy Trailblazer involved in an accident. Funds will go to the lease payment account to cover rental expenses.

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.