



# Blount County Budget Committee Memo

TO:

FROM:

RE:

DATE:

1. Background \_\_\_\_\_

\_\_\_\_\_

2. History (tell if the item has been brought to the budget committee previously) \_\_\_\_\_

\_\_\_\_\_

3. Current Operations (how are operations without the requested item/service) \_\_\_\_\_

\_\_\_\_\_

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

\_\_\_\_\_

5. Impact if not funded (provide a summary on impact to the mission if the item/service is not approved) \_\_\_\_\_

\_\_\_\_\_

Budget Impact	
Original Budget	
Amendment Impact	
Proposed Revised Budget	

*Anjanae Brueland 3/26/2025*

Signature from Department Head/Elected (or designee)