## Blount County Government Budget Amendment Request

**Budget Amendment Request** Department: Extended School FY 22-23 Account: Fund 146 Type of Amendment: (check one) (no overall change to adopted budget) Transfer (reducing adopted budget due to unforeseen effect on "revenue" or "expense") Decrease (raising adopted budget due to unforeseen effect on "revenue" or "expense") ✓ Increase 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\*\*\* **Amount** Account Number Description 8,000.00 TO 146-73300-510300 Assistant 595,000.00 Part Time Personnel 146-73300-516900 32,910.00 Social Security 146-73300-520100 57,322.00 Retirement 146-73300-520400 14,000.00 Health Insurance 146-73300-520700 250.00 Dental Insurance 146-73300-520800 7,773.00 146-73300-521200 Medicare 12,000.00 Transporation 146-73300-531500 20,000.00 Other Contracted Svc (Field Trips) 146-73300-539900 **TOTAL** 747,255.00 **Account Number** Description Amount FROM **TOTAL** 0.00 Explanation: PAGE 1 OF 2

Signature of Official/Department Head/Date

Budget increase for Award given under ARP Stabilization Grant Round 2

Signature of County Mayor/Date

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

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