

**Blount County Government
Budget Amendment Request**

FY 16-17

Department: Circuit Court Clerk
Account: 101-053120

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 | 101-052220-500332-51900 | Legal Notices/ Other Charges | 120,000.00 |
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| | | | |
| TOTAL | | | 120,000.00 |

| | Account Number | Description | Amount |
|-------|----------------------|------------------------------|------------|
| FROM | 101-0-455401 - 51900 | Excess fees General Sessions | 120,000.00 |
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| TOTAL | | | 120,000.00 |

Explanation: Cover indigent billing for remainder of year.

 5/30/17

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.**