

Budget Amendment Request

FY 19-20

Department: Probation

Account: 101-53910

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	101-53910-531000	Contracts with Other Public Agency (EMIF Fund)	12,000.00
TOTAL			12,000.00

	Account Number	Description	Amount
FROM	101-53910-539900	Other Contracted Services	12,000.00
TOTAL			12,000.00

Explanation: The \$12,000.00 was previously allocated for Electronic Monitoring in 101-53910-539900 but needs to be transferred into the new GPS/SCRAM EMIF fund to cover all electronic monitoring./alcohol monitoring expenses.

 7/30/19
 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.