

**BUDGET APPROPRIATION INCREASE REQUEST**

Auditor Number B-52

DEPARTMENT NAME ENVIRONMENTAL HEALTH

Date: March 5, 2026

I am requesting an increase to my budget appropriates as listed below:

Check one  "Previous Year Revenue"  "New Revenue"

Funding Source 701 - Enforcement Assistance

**\*\*\*Note** General Fund and Public Safety "MUST" use Contingency when increasing budget

Increase Revenue Budget				Increase Expenditure Budget			
FUND DEPT NO	ACCOUNT NUMBER	ACCOUNT NAME	AMOUNT	FUND DEPT NO	ACCOUNT NUMBER	ACCOUNT NAME	AMOUNT
2062	471102	Cost Reimbursement	\$ 23,000.00	1109	59000	Contingency	\$ 23,000.00
1109	59000	Contingency	\$ 23,000.00	2062	53230	Professional Services	\$ 23,000.00
Total Journal			\$ 46,000.00	Total Journal			\$ 46,000.00

TRANSFER APPROVED

*Alicia Brute* 3-5-26  
SIGNATURE OF REQUESTING OFFICIAL DATE

SANDRA PALMER 03/09/2026  
AUDITOR DATE

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BOARD OF SUPERVISORS DATE