

**BUDGET APPROPRIATION INCREASE REQUEST**Auditor Number B-86DEPARTMENT NAME District AttorneyDate: June 11, 2025

I am requesting an increase or decrease to my budget appropriations as listed below:

**Check one** ☐ "Previous Year Revenue"☒ "New Revenue"Funding Source 101-301370 Assigned Strategic Priorities**\*\*\*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
20139	450629	State Grants	\$ 291,475.00	2002	59000	Contingency	\$ 291,475.00
2002	59000	Contingency	\$ 291,475.00	106	301900	Public Safety/Fund Bal Ava.	\$ 291,475.00
Total Journal			\$ 582,950.00	Total Journal			\$ 582,950.00

INCREASE / (DECREASE) APPROVED

SIGNATURE OF REQUESTING OFFICIAL DATE

SANDRA PALMER 6/16/2025

AUDITOR DATE

BOARD OF SUPERVISORS DATE

A-117

Jan-19