

**BUDGET APPROPRIATION INCREASE REQUEST**Auditor Number B-22DEPARTMENT NAME ENVIRONMENTAL HEALTHDate: November 17, 2025

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

**Check one** ☒ "Previous Year Revenue" ☐ "New Revenue"**Funding Source** Revenue deposited in prior year - account numbe 4011-450459**\*\*\*Note** *General Fund and Public Safety "MUST" use Contingency when increasing budget*

| Increase Revenue Budget |                   |                        |              | Increase Expenditure Budget |                   |                       |              |
|-------------------------|-------------------|------------------------|--------------|-----------------------------|-------------------|-----------------------|--------------|
| FUND<br>DEPT NO         | ACCOUNT<br>NUMBER | ACCOUNT<br>NAME        | AMOUNT       | FUND<br>DEPT NO             | ACCOUNT<br>NUMBER | ACCOUNT<br>NAME       | AMOUNT       |
| 101                     | 301900            | Fund Balance Available | \$ 22,388.08 | 4011                        | 53230             | Professional Services | \$ 22,388.08 |
| Total Journal           |                   |                        | \$ 22,388.08 | Total Journal               |                   |                       | \$ 22,388.08 |

TRANSFER APPROVED


11-17-25  
 SIGNATURE OF REQUESTING OFFICIAL DATE

Ana Zamacena 11/18/2025  
 AUDITOR DATE
BOARD OF SUPERVISORS DATE