

BUDGET APPROPRIATION INCREASE REQUEST

Auditor Number B-76

DEPARTMENT NAME Senior Nutrition, Meals on Wheels

Date: May 12, 2026

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

Check one "Previous Year Revenue" "New Revenue"

Funding Source OAA Amendment-MOW

***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
-5063	450727	Unanticipated Revenue Federal Title III	\$ 14,852	-5063	53230	Professional & Special Svcs	\$ 14,852
Total Journal			\$ 14,852	Total Journal			\$ 14,852

From and To
\$0.00

INCREASE / (DECREASE) APPROVED

D. Oglesby 5/12/26
SIGNATURE OF REQUESTING OFFICIAL DATE

SANDRA PALMER 5/20/2026
AUDITOR DATE

BOARD OF SUPERVISORS DATE