

BUDGET APPROPRIATION INCREASE REQUEST

Auditor Number B-47

DEPARTMENT NAME ENVIRONMENTAL HEALTH

Date: February 13, 2026

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

Check one "Previous Year Revenue" "New Revenue"

Funding Source 476 Safe Drinking Water

*****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
4011	450459	State Grants	\$ 48,977.15	1109	59000	CONTINGENCY	\$ 48,977.15
1109	59000	CONTINGENCY	\$ 48,977.15	4011	57605	Vehicles	\$ 48,977.15
Total Journal			\$ 97,954.30	Total Journal			\$ 97,954.30

TRANSFER APPROVED

Sari S Mueller 2-13-26
SIGNATURE OF REQUESTING OFFICIAL DATE

Ana Zamacona 02/17/2026

AUDITOR DATE

BOARD OF SUPERVISORS DATE