Tehama County Auditor's Office

BUDGET APPROPRIATION INCREASE REQUEST

Auditor Number _____

DEPARTMENT NAME TRAX

Date: March 24, 2025

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

Check one [ ] **"Previous Year Revenue"** [X] **"New Revenue"**

Funding Source LCTOP Fund 532, SGR Fund 537, STA Fund 515, LTF Fund 507

****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**
53210	53210	Miscellaneous Expense	$ 527,828.00	117/3037	471220	Operating Transfer-In	$ 2,502,999.93
53710	55628	Contr to TRAX	$ 310,900.00				
51510	55520	Contr to other Agencies	$ 1,000,000.00				
50710	55520	Contr to other Agencies	$ 664,271.93				
		Total Journal	**$ 2,502,999.93**			Total Journal	**$ 2,502,999.93**

INCREASE / (DECREASE) APPROVED

_____

SIGNATURE OF REQUESTING OFFICIAL DATE

_____

AUDITOR DATE

_____

BOARD OF SUPERVISORS DATE

A-117

Jan-19