Tehama County Auditor's Office

BUDGET APPROPRIATION INCREASE REQUEST

Auditor Number B-4

DEPARTMENT NAME Air Pollution

Date: September 12, 2025

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

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

Funding Source AB923

****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**
609	301900	Fund Balance	$ 304,657.00	60910	55520	Contr'b to Other	$304,657.00
		Total Journal	**$ 304,657.00**			Total Journal	**$ 304,657.00**

INCREASE / (DECREASE) APPROVED

9-25-25

SIGNATURE OF REQUESTING OFFICIAL DATE

SANDRA PALMER 9/25/2025

AUDITOR DATE

BOARD OF SUPERVISORS DATE

A-117

Jan-19