

BUDGET APPROPRIATION INCREASE REQUESTDEPARTMENT NAME CALAIM/JailAuditor Number B-34Date: 1/14/2026

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

Check one ☒ "Previous Year Revenue" ☐ "New Revenue"**Funding Source** CALAIM AB133 funds held in fund 581 for payment to HMA for services rendered through December 2025.*****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
2032	4505723	CALAIM	\$ 9,417.50	2002	59000	Contingency	\$ 9,417.50
2002	59000	Contingency	\$ 9,417.50	2032	53230	Professional/Special Services	\$ 9,417.50
Total Journal			\$ 18,835.00	Total Journal			\$ 18,835.00

TRANSFER APPROVED


1.13.2026
 SIGNATURE OF REQUESTING OFFICIAL DATE
Ana Zamacona 1/14/2026

AUDITOR

DATE

BOARD OF SUPERVISORS DATE