

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" "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