HERNANDO COUNTY BUDGET AMENDMENT REQUEST FORM FY 2024

REVENUE ACCOUNTS: <u>Account #</u>	Account Name	Present Budget	<u>Decrease</u>	Increase	Amended Budget
					\$0
					0
					0
					0 0
					0
					0
					0
					0
	TOTAL	\$0	\$0	\$0	\$0
EXPENDITURE ACCOUN	TS:				
Account #	Account Name	Present Budget	Decrease	Increase	Amended Budget
					-
4611-07811-5101200	SALARIES & WAGES-REGULAR	2,649,886		27,495	2,677,381
4611-07811-5102100	FICA TAXES-MATCHING	202,593		2,387	204,980
4611-07811-5102200	RETIREMENT CONTRIBUTIONS	455,606		4,355	459,961
4611-07811-5102300	LIFE & HEALTH INSURANCE	834,765		7,167	841,932
4611-07811-5102400	WORKERS COMP PREMIUMS	35,582		42	35,624
4611-07811-5909999	BUDG RES/CASH FORWARD	2,809,840	41,446		2,768,394
					(
					(
					(
					(
					(
					(
					(
					(
					(
					(
	TOTAL	\$6,988,272	\$41,446	\$41,446	\$6,988,272
Justification:					
To cover FY23 remaining c	ost for new personnel addition, Development S	ervices Facilitator.			
Department Name: Building Department			De	partment No.	07811
	<u>,</u>				
APPROVAL SIGNATURES	5:				
Department Head	d:	D	late:		
Budget Office	r:	D	ate:		

Legistar # / Mtg. Date: 13712 2/27/24

 BUDGET OFFICE USE ONLY:

 Fund # 4611
 Department # 07811
 Verified By: T.T.
 Date Verified:
 02/19/2024
 BA2024-057

 Revised:
 9/20/23