HERNANDO COUNTY BUDGET AMENDMENT REQUEST FORM FY 2023

REVENUE ACCOUNTS:			_		
Account #	Account Name	Present Budget	<u>Decrease</u>	<u>Increase</u>	Amended Budget
					\$0
					0
					0
					0
					0
					0
					0
					0
	TOTAL	\$0	\$0	\$0	0 \$0
				**	
EXPENDITURE ACCOUNT	S:				
Account #	Account Name	Present Budget	Decrease	Increase	Amended Budget
					\$0
4611-07811-5101200	SALARIES & WAGES-REGULAR	2,306,487		5,131	2,311,618
	FICA TAXES-MATCHING	176,442		392	176,834
	RETIREMENT CONTRIBUTIONS	291,094		611	291,705
	LIFE & HEALTH INSURANCE	597,994		2,620	600,614
	WORKERS COMP PREMIUMS	34,409		8	34,417
	BUDGET RES/CASH FORWARD	2,674,898	8,762	Ü	2,666,136
1011 07011 000000	BOBOLI REGIONOLITI ORAWARD	2,07 1,000	0,7 02		2,000,100
					0
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					0
					0
					0
					0
					0
	TOTAL	\$6,081,324	\$8,762	\$8,762	\$6,081,324
		++,+++,+=+	70,100	77,15	+-,,
Justification: To cover th	e FY23 remaining cost for new personnel ac	dition, Customer Care	Specialist.		
Department Name:	Building Department			Department No.	07811
	3 1	_			
APPROVAL SIGNATURES:					
AFFROVAL SIGNATURES.					
Department Head:			Date:		
		<i>μαις.</i>			
Budget Officer:			Date:		
Legistar # / Mtg. Date:	12598 8/8/2023				
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BUDGET OFFICE USE ON					
Fund # 4611	Department # 07811	Verified By: TT	Date Verified:	7/27/23	BA2023-137

Revised: 9/20/22