HERNANDO COUNTY BUDGET AMENDMENT REQUEST FORM FY 2024

REVENUE ACCOUNTS: <u>Account #</u>	Account Name	Present Budget	Decrease	Increase	Amended Budget	
					\$0	
					0	
					0	
					0 0	
					0	
					0	
					0	
					0	
	TOTAL	\$0	\$0	\$0	\$0	
EXPENDITURE ACCOUN	rs.					
Account #	Account Name	Present Budget	Decrease	Increase	Amended Budget	
0011-01551-5909985	Budget Res-Ded Ind Dev	704,142	145,027		\$559,115	
0011-01771-5606301	Improv (Grtr than \$50,000)	72,017		145,027	217,044	
					0	
					0	
					0	
					0	
					0	
					0	
					0	
					0	
					0	
					0	
					0	
					0	
					0	
					0 0	
	TOTAL	\$776,159	\$145,027	\$145,027	\$776,159	
<u></u>						
Justification: To cover u	nanticipated expenses					
Department Name:		Department No.				
APPROVAL SIGNATURES						
Department Head	:	Date:				
Budget Officer:			Date:			
`						
Legistar # / Mtg. Date:	N/A					
BUDGET OFFICE USE ON	ILY:					
Fund # 0011	Department # 01551 / 01771	Verified By: AB	Date Verified: 9/4/2	24	BA2024-156	
Revised: 9/20/23		-				

Revised: 9/20/23