HERNANDO COUNTY BUDGET AMENDMENT REQUEST FORM FY 2026

REVENUE ACCOUNTS: Account # **Account Name** Available Balance **Amended Balance Decrease Increase** 0 0 0 0 0 0 0 0 0 **TOTAL** \$0 \$0 \$0 \$0 **EXPENDITURE ACCOUNTS: Account Name** Available Balance **Amended Balance** Account # **Decrease** <u>Increase</u> **BUDGEDT RESERVE CASH FORWARD** 0011-05981-5909999 25,107,616 2,900,000 \$22,207,616 0011-02051-5909185 FEES & COSTS SHERIFF 69,887,087 2,900,000 \$72,787,087 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 **TOTAL** \$94,994,703 \$2,900,000 \$2,900,000 \$94,994,703 Justification: To fund the Sheriff's body worn camera program. CIP Name/Number: **Department Name:** SHERIFF Department No. 02051 **APPROVAL SIGNATURES:** Department Head: Date: **Budget Officer:** Date: Legistar # 16686 / Mtg. Date: 11/18/25 BUDGET OFFICE USE ONLY:

Verified By: ED

Date Verified: 11/10/25

BA2026-013

Fund # 0011 Revised: 10/20/25 Department # 02051/05981