City of Angels Camp

Budget Adjustment Request

Department:	3002 - Community Support	Date:				7/1/2024	
Account Number	Account Description	Pre	evious Budget Balance	Change Request Amount: Expense Inc/(Dec), Revenue (Inc)/Dec		New Budget Balance DB/(CR)	
295-3000-59999-0000	Transfer Out	\$	-	\$	35,000.00	\$	35,000.00
010-3002-49999-0000	Transfer In	\$	30,640.00	\$	35,000.00	\$	65,640.00
010-3002-50201-0000	Community Support	\$	-	\$	35,000.00	\$	35,000.00
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Total*		\$	30,640.00		105,000.00	\$	135,640.00
Justification:	Moving 79 South Main to the Museum						
Authorizations:							
Department Manager		=		Date:			
Fiscal Manager:		_		Date:			
Administrator:**		=		Date:			
Entered into System by:		-		Date:			
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^{*}Total must be zero unless additional budget authorization given by Council.

^{**}Administrator must approve all budget adjustments not authorized by Council.