

# Budget Adjustment Request Form

County of CHRISTIAN ♦♦♦ State of MISSOURI

2018-1

Date: 12/10/2018

PERSON REQUESTING	TITLE/POSITION	DEPARTMENT
Kay Brown	County Clerk	Elections

Item (s) Requested : Appropriation of unanticipated revenue


Reason for Request: Grant proceeds exceeded expectation

Amount Requested : 3,950.00

Source of Funds:   
 (Other Rev., Grants, etc..) HAVA Grant

Line Item Coverage :   
 (Account No(s).) 289-610-52515


I certify that the items(s) listed above is(are) appropriate and necessary for the operation of this department and that there is sufficient funds to cover the estimated cost.

Signature: 

Date: 12-11-2018

## CERTIFICATION OF AUDITOR

I certify that the expenditure contemplated by this document is within the purpose of the appropriation to which it is to be charged and that there is an unencumbered balance of anticipated revenue appropriated for payment of same.

  
Auditor Certification

12/17/18  
Date

## APPROVAL OF THE CHRISTIAN COUNTY COMMISSION

\_\_\_\_\_  
Date

\_\_\_\_\_  
Presiding Commissioner

\_\_\_\_\_  
Commissioner Eastern District

\_\_\_\_\_  
Commissioner Western District