



# Office of Financial Management

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## Memorandum

**Date:** \_\_\_\_\_  
**To:** Board of County Commissioners  
**From:** Community Planning & Permitting  
**Subject:** \_\_\_\_\_ Budget Amendment  
[Fiscal Yr]

**Request:** \_\_\_\_\_ **Amendment Request**  
[Fund Name or other brief description]

**Expenditure Amount:** \_\_\_\_\_

**Department/Office:** \_\_\_\_\_

**Description:**

*[Internal: Please describe the circumstances necessitating the request: what was involved in arriving at costs, current status of entire appropriation, and status of specific account for Amendment. If the request includes unanticipated revenue, describe fully. Memo on Department letterhead should also be included with request.]*

### FUND BALANCE OR UNANTICIPATED REVENUE

**Source:** \_\_\_\_\_ **Fund** \_\_\_\_\_  
[Appropriation - Fund Name] [Fund Number]

### TRANSFER

**Source:** \_\_\_\_\_ **Fund** \_\_\_\_\_  
[Appropriation - Fund Name] [Fund Number]  
**Transfer to**  
\_\_\_\_\_ **Fund** \_\_\_\_\_  
[Appropriation - Fund Name] [Fund Number]

Claire Levy County Commissioner

Marta Loachamin County Commissioner

Ashley Stolzmann County Commissioner

**BOULDER COUNTY  
REQUEST FOR BUDGET AMENDMENT**

**Amendment Type**

ONE TIME (CURRENT YEAR ONLY)

ON-GOING BASE CHANGE REQUIRED

**Amendment Category** *Please select all that apply:*

FUND BALANCE

TRANSFER

UNANTICIPATED REVENUE

**REQUESTED EXPENDITURE INCREASE AMOUNT:** \_\_\_\_\_

(Please use expenditure worksheet on page 3 below to detail this amount across appropriate Org-Fund-Appropriation-Service segments]

**REQUESTED REVENUE INCREASE AMOUNT:** \_\_\_\_\_

(Please use revenue worksheet on page 4 below to detail this amount across appropriate Org-Fund-Appropriation-Service segments]

SUBMITTED BY: \_\_\_\_\_  
*(Department Director/Elected Official Signature)*

DATE: \_\_\_\_\_

REVIEWED BY BUDGET: \_\_\_\_\_  
*(Budget Officer Signature)*

DATE: \_\_\_\_\_

APPROVED BY THE BOARD OF COMMISSIONERS WITH DIRECTION TO BUDGET TO PREPARE THE RESOLUTION:

\_\_\_\_\_  
*(Chair of Board of County Commissioners Signature)*

DATE: \_\_\_\_\_



