PRINT

Budget Amendment # _____

# LIBERTY COUNTY
# BUDGET AMENDMENT REQUEST
# FY 2025

**FUND**_____ **DEPT**_____

| Account # | Line Item Name | Current Budget | Increase (Decrease) | Amended Budget |
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**REASON:**_____

09/30/2024

**ELECTED OFFICIAL/DEPT HEAD** **DATE**

**APPROVED BY COMMISSIONERS COURT:**

**COUNTY JUDGE JAY KNIGHT** **DATE**