

SL COUNTY BUDGET REQUEST / ADJUSTMENT FORM

Executive Summary

Reference No: 885100YE01	For Fiscal Year: 2018
Requesting Organization: 88510000 RECORDER-TAX ADMI	Date of Request: 16-Aug-18
Budget Adjust Type(s): Other <i>Appropriation Unit Shift</i>	Ongoing (Y or N): N
	If Yes, next year's CF impact: \$0
	Net FTE Change: 0.00

Description and Justification:

Security Camera Upgrade: Reallocation of Capital project funds from Fuji Microfilm Archive Writer Replacement to New Security Camera and Storage Upgrade. This project is needed due to outdated security camera equipment. Current equipment is not fully compatible with current Windows Operating Systems, PCI compliance standards, and Countywide Policy 6000. This upgrade brings us in to compliance with these issues and would allow Protective Services to access our video feed, fully integrate with Facilities' security features, and significantly improve the quality of the video. The new system would also allow video coverage of our Vault, which stores millions of documents, coverage of all public spaces, and all areas where cash is handled. This new equipment mirrors that of the Treasurer's Office. The Recorder's Office was able to find a more efficient avenue of processing microfilm archive writing by partnering with the State. This partnership will allow us to eliminate the Capital Project of replacing our Microfilm Archive Writer.

Fund Impact

SUMMARY OF FUND IMPACT BY FUND

FUND:	340 STATE TAX ADMINISTRATION LEVY FUND
Fund Impact (Budgetary)	\$0
Fund Impact (Transfers)	\$0
TOTAL FUND IMPACT	\$0

SUMMARY OF CNTY FUNDING IMPACT BY DEPT

DEPT	REVENUE	EXPENSE	BAL SHEET	CNTY FUNDING
TOTALS	0	0	0	0

Approvals

Division Director: _____

Date: 8-16-18

Dept. or Elected Fiscal Mgr: _____

Date: 8-16-18

Dept. Dir. or Elected Official: _____

Date: 8-16-18

Facilities Division Director:
(Capital Projects Only) _____

Date: _____

Chief Financial Officer: _____

Date: 8-17-18

Mayor or Designee: _____

Approve

Date: 8/22/18

Approve

Council Action: _____

Approve

Date: _____

Budget Adjustment Detail

Budget Year: 2018 * Requesting Department: BB510000 RECORDER-TAX ADMINISTRATION
 Budget Period: Post June Year-End * Req Item No: BB5100YE01 * Adjustment Title: Security Camera Upgrade
 Adjustment Type(s): Other Appropriation Shift

Expense Budget String(s):

FUND	SUB-DEPT ID	EXPENSE ACCOUNT	PROG/ACT ID (OPT)	PROJECT ID (CAP)	AMOUNT
340	8851000000	679005	EY000		(21,441)
340	8851000000	607015	EY000		21,441

TOTAL EXPENDITURES Page 1: \$0
 TOTAL EXPENDITURES ALL PAGES: \$0

Revenue Budget String(s):

FUND	SUB-DEPT ID	REVENUE ACCOUNT	PROG/ACT ID (OPT)	PROJECT ID (CAP)	AMOUNT

TOTAL REVENUES Page 1: \$0
 TOTAL REVENUES ALL PAGES: \$0

Balance Sheet/Fund Unrestriction String(s): Bal sheet strings only required for Proprietary Fund adjustments or fund unrestrictions; check if applicable.

FUND	SUB-DEPT ID	BAL. SHEET ACCOUNT	AMOUNT
		BAL_SHT or 499999	
		BAL_SHT or 499999	
		BAL_SHT or 499999	

TOTAL BALANCE SHEET CHANGE: \$0

* Ongoing (Y or N): N No. of New FTEs: 0.00 (2)
 If Yes, next year's CF impact: \$0 No. of New Time Limited FTEs: 0.00 (2)
 No. of Transferred FTEs: 0.00 (2)
 No. of Abolished FTEs: 0.00 (2)

Fund Balance Transfers:

From Fund	From Dept ID	To Fund	To Dept ID	Amount

Description and justification: (Attach additional pages as needed.)*

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(1) If the request is for a grant, include the dates the grant will expire and what obligations are required of the County after the grant expires.



FACILITIES MANAGEMENT

Facilities Services Cost Estimate

Quote #: 18-59860

Date: 06/15/2018
 Facility: RECORDER
 Requested By: HHUTCHISON
 Phone: 3854688159
 Project Description: QUOTE for new security cameras 20TB storage
 Account Number: 8800000100-EV001-607040
 Prepared By: BEAGLEY, WAYNE

Projected Labor Hours		
Craft	Description of work	Extended Cost
ETRN	QUOTE for new security cameras 20TB storage	\$3,000.00
Labor Total:		\$3,000.00
Material Description		
Trade	Quantity Description	Extended Cost
ETRN	1 20TB recorder , 13 Cameras , switch , wire , misc	\$18,441.15
Material Total:		\$18,441.15
Total Cost Estimate:		\$21,441.15

Approved By: _____
 Title: _____
 Date: _____

This is a cost estimate only.

- Labor and material costs are good for 30 days from the date of this estimate.
- Unforeseen complications and/or requested changes in the scope of work may increase the cost of the work and will necessitate additional approvals which will be estimated separately.