

SL COUNTY BUDGET REQUEST / ADJUSTMENT FORM

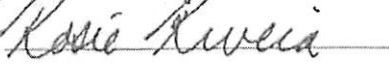
Executive Summary	
Reference No: 912500YE01 Requesting Organization: 91250000 SHERIFF COURT SVC Budget Adjust Type(s): Appropriation Unit Shift	For Fiscal Year: 2018 Date of Request: 13-Nov-18 Ongoing (Y or N): N If Yes, next year's CF impact: \$0 Net FTE Change: 0.00
Description and Justification: Copy Machine: The Public Safety Bureau is requesting a shift of funds from Operations to Capital to purchase a replacement copy machine.	

Fund Impact

SUMMARY OF FUND IMPACT BY FUND	
FUND:	110 GENERAL 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: _____
Dept. or Elected Fiscal Mgr: 	Date: <u>11/13/18</u>
Dept. Dir. or Elected Official: 	Date: <u>11/13/18</u>
Facilities Division Director: (Capital Projects Only)	Date: _____
Chief Financial Officer:  (For Darin Casper)	Date: <u>11/14/18</u>
Mayor or Designee: 	Date: <u>11/14/18</u>
Council Action: _____	Date: _____

Budget Adjustment Detail									
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Budget Year: 2018 * Requesting Department: 91250000 SHERIFF COURT SVCS AND SECURITY

Budget Period: Post June Year-End * Req Item No: 912500YE01 * Adjustment Title: Copy Machine

Adjustment Type(s): Appropriation Unit Shift

Expense Budget String(s):

[illegible]

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

Revenue Budget String(s):[illegible]

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 unrestricted; 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
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* 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:[illegible]Description and Justification: (Attach additional pages as needed).^a

The Public Safety Bureau is requesting a shift of funds from Operations to Capital to purchase a replacement copy machine.

(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.