15,4

REQUEST FOR BUDGET ADJUSTMENT

| Executive Summary | | |
|---|----------------------------|-----------|
| Reference No: 8400000YE02 | For Fiscal Year: | 2017 |
| Requesting Organization: 82000000 DISTRICT ATTOR! | NEY Date of Request: | 21-Jun-17 |
| Budget Adjust Type(s): FTE Request | One Time Change (Y or N): | N |
| New Request | If No, next year's impact: | \$54,266 |
| | Net FTE Change: | 1.00 |
| Description and Justification: | • | |

CJC-VOCA grant: The District Attorney's Office Children's Justice Center program has been awarded a VOCA grant for a Child and Family Specialist position. The total amount of the two-year grant is \$97,107.26 and begins July 1, 2017 through June 30, 2019 with possible additional awards at that time. This Time-Limited position will provide support services to child victims and others impacted by crime. Upon a victim arriving at the Children's Justice Center this employee will provide trauma supportive response, provide comfort items, and will also provide information to help the child and their family adjust to the investigative process. In additon, follow-up calls with the victims and their families on their well being will be conducted by the Child and Family Specialist. This budget request is for \$15,498 in spending authority that is required to hire the time-limited employee and purchase necessary items for them to begin providing services and to recognize the revenue that should be received as reimbursement for these expenses. Additional spending authority in both personnel and operating will be required in the amount of \$54,266 for 2018 and the remaining \$27,343 will berequired in 2019 with offsetting revenue. No new

Fund Impact

| SUMMARY OF FUND IMPACT | BY FUND |
|-------------------------|---------------------|
| FUND: | 110 GENERAL FUND |
| Fund Impact (Budgetary) | \$0 |
| Fund Impact (Transfers) | \$0 |
| TOTAL FUND IMPACT | \$0 |

County funds are requested.

Mayor Financial Administration

| SUMMARY OF CNTY FUNDING IMPACT BY DEPT | *************************************** | | | |
|--|---|---------|-----------|--------------|
| DEPT | REVENUE | EXPENSE | BAL SHEET | CNTY FUNDING |
| 8200000300 CJC SO VALLEY | 15,498 | 15,498 | o | 0 |
| TOTALS | 15,498 | 15,498 | 0 | 0 |

| | | Approvals | | |
|---|---------------------|--|-------|-------------------------|
| Division Director: | Risa Ashman | Digitally signed by Lisa Ashmar Date: 2017.06.21 10:06:52 -06'00' | Date: | |
| Dept. or Elected Fiscal Mg | gr: Elizabeth Bayle | Digitally signed by Birabeth Bayler DN: cnwElizabeth Bayler, o=District Attorney's Office, out, email=ebayler@sko.org, c=US Date: 2017.06.21 1144:25 -06'00' | Date: | |
| Dept. Dir. or Elected Offic | ial: Cim Si | Digitally signed by Sim Gilt Date: 2017.06.21 10:07:20 -06'00' | Date: | |
| Facilities Division Directo (Capital Projects Only) | r: | | Date: | Providence |
| Chief Financial Officer: | Alh | | Date: | 6/21/17 |
| Mayor or Designee: | Elin | Approve | Date: | 6/21/17 |
| | | | | Version 87 8/19/2016 |

| | | | Approve | | | |
|-----------------|-------------------|----------------|-----------------|---------------------|---|---------|
| uncil Actior | 1; | | | Date: | | |
| | | | Approve | • | *************************************** | |
| | | Bud | get Adjustmer | nt Detail | | |
| get Year: | 2017 | | * Requesting De | partment: 82000 | 000 DISTRICT ATTORNEY | • |
| get Period: | ost June Year-End | * Req Item No: | 8400000YE02 - | * Adjustment Title: | CJC- VOCA grant | **** |
| stment Type(s): | FTE Request | * | New Request | - | | |
| Expense Budget | String(s): | SUB-DEPT ID | EXPENSE ACCOUNT | PROG/ACT ID (OPT) | PROJECT ID (CAP) | AMOUNT |
| 110 | 082 | 8200000300 | 601040 | FE057 | | 7,280 |
| 110 | 082 | 8200000300 | 603025 | FE057 | | 1,345 |
| 110 | 082 | 8200000300 | 603040 | FE057 | | 35 |
| 110 | 082 | 8200000300 | 603050 | FE057 | | 4,185 |
| 110 | 082 | 8200000300 | 603005 | FE057 | | 557 |
| 110 | 082 | 8200000300 | 615025 | FE057 | | 1,177 |
| 110 | 082 | 8200000300 | 615020 | FE057 | | 120 |
| 110 | 082 | 8200000300 | 615035 | FE057 | | 800 |
| | | | TOTAL | VERLINITIES OF THE | | |
| | | | TOTAL E. | XPENDITURE CHANGE: | | \$15,49 |

| FUND | AGENCY | SUB-DEPT ID | REVENUE ACCOUNT | PROG/ACT ID (OPT) | PROJECT ID (CAP) | AMOUNT |
|------|--------|-------------|-----------------|--------------------|------------------|---------------------------------------|
| 110 | 082 | 8200000300 | 415000 | FE057 | | 15,498 |
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| | | | | | | |
| | | | тот | AL REVENUE CHANGE: | <u> </u> | \$15,498 |

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

| FUND | SUB-DEPT ID | BAL. SHEET ACCOUNT | AMOUNT |
|------|-------------|-----------------------------|--------|
| | | BAL_SHT | |
| | | BAL_SHT | |
| | | BAL_SHT | |
| | | TOTAL BALANCE SHEET CHANGE: | \$0 |

| One Time Change (Y or N): N | No. of New FTEs: 0.00 (2)
| If No, next year's impact: \$54,266 | No. of New Time Limited FTEs: 1.00 (2)
| No. of Transferred FTEs: 0.00 (2)
| No. of Other FTEs: 1.00 (2)

Fund Balance Transfers:

| From Fund | From Dept ID | To Fund | To Dept ID | Amount |
|-----------|--------------|---------|------------|--------|
| | | | | |
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Description and justification: (Attach additional pages as needed.)*

The District Attorney's Office Children's Justice Center program has been awarded a VOCA grant for a Child and Family Specialist position. The total amount of the two-year grant is \$97,107.26 and begins July 1, 2017 through June 30, 2019 with possible additional awards at that time. This Time-Limited position will provide support services to child victims and others impacted by crime. Upon a victim arriving at the Children's Justice Center this employee will provide trauma supportive response, provide comfort items, and will also provide information to help the child and their family adjust to the investigative process. In additon, follow-up calls with the victims and their families on their well being will be conducted by the Child and Families Specialist. This budget request is for \$15,498 in spending authority that is required to hire time-limited employee and purchase necessary items for them to begin providing services and to recognize the revenue that should be received as reimbursement for these expenses. Additional spending authority in both personnel and operating will be required in the amount of \$54,266 for 2018 and the remaining \$27,343 will berequired in 2019 with offsetting revenue. No new County funds are requested.

Position Management Information

INSTRUCTIONS: Complete one section for each position. To facilitate efficient execution of HR actions, please complete ALL fields as requested. TO fields are required for all position actions while FROM fields only need to be entered for position transfers. Print pages for completed sections and attach to the budget adjustment form.

| Position 1 | | | | | |
|--|-----------------|--------------|-----------------|------------|--|
| Position Number (For changes to existing positions) | | | | | |
| Existing/Proposed Job Start Date | | 9/1 | /2017 | | |
| Existing/Proposed Job Code | 1 | | | | |
| Existing/Proposed Job Title | T | Child and Fa | amily Specialis | st | |
| Position Type: Full-Time (FT), Part-Time (PT) | | | FT | | |
| Time Limited? Yes / No | Yes | | | | |
| If Time Limited, expected expiration date | 6/30/2019 | | | | |
| Location Code (four digit number) | 1393 | | | | |
| Fund | To: | 110 | From: | 110 | |
| PS/BRASS Sub Department Id | To: | 8200000300 | From: | 8200000300 | |
| Reports To Position Number | 1663 | | | | |
| Reports To Job Title | Program Manager | | | | |
| FTE (Example: .50 / .75 / 1.0) | To: | 1 | From: | 1 | |
| Action Type: (New position (N), New TL (TL), Reclassification (R), Transfer (T), FTE Change/Re-Allocation (RA), Abolish (A), Other (O)) | | | TŁ | - | |

| Position 2 | | | |
|--|-----|-------|--|
| Position Number (For changes to existing positions) | | | |
| Existing/Proposed Job Start Date | | | |
| Existing/Proposed Job Code | | | |
| Existing/Proposed Job Title | | | |
| Position Type: Full-Time (FT), Part-Time (PT) | | | |
| Time Limited? Yes / No | | | |
| If Time Limited , expected expiration date | | | |
| Location Code (four digit number) | | | |
| Fund | To: | From: | |
| PS/BRASS Sub Department Id | To: | From: | |
| Reports To Position Number | | | |
| Reports To Job Title | | | |
| FTE (Example: .50 / .75 / 1.0) | To: | From: | |
| Action Type: (New position (N), New TŁ (TL), Reclassification (R), | | | |
| Transfer (T), FTE Change/Re-Allocation (RA), Abolish (A), Other (O)) | | | |

| Position 3 | | | |
|--|-----|-------|-------------|
| Position Number (For changes to existing positions) | | | |
| Existing/Proposed Job Start Date | | | |
| Existing/Proposed Job Code |] | | |
| Existing/Proposed Job Title | | | $\neg \neg$ |
| Position Type: Full-Time (FT), Part-Time (PT) | | | |
| Time Limited? Yes / No | | | |
| If Time Limited, expected expiration date | | | |
| Location Code (four digit number) | | | |
| Fund | To: | From: | |
| PS/BRASS Sub Department Id | To: | From: | |
| Reports To Position Number | | | |
| Reports To Job Title | | | |
| FTE (Example: .50 / .75 / 1.0) | To: | From: | |
| Action Type: (New position (N), New TL (TL), Reclassification (R), | 1 | | |
| Transfer (T), FTE Change/Re-Allocation (RA), Abolish (A), Other (O)) | 1 | | |

| Total No. of New FTEs: | 0 |]a) |
|------------------------------------|---|-----|
| Total No. of New Time Limted FTEs: | 1 | la) |
| Total No. of Transferred FTEs: | | a) |
| Total No. of Other Actions: | l | la) |

(a) Totals will transfer to the "Adj Request" tab's FTE section.

| Council Approval section b | low to be completed only by Council Staff and to be submitted to HR for final proces | ising. |
|----------------------------|--|--------|
| Council Approved | es. No. Dete. Signature | |

Action Type List:

N New

TL New Time Limited

R Reclass

Transfer

Abolish

RA Re-allocate

Other

Reclass Flag



GARY R. HERBERT Governor

SPENCER J. COX Lieutenant Governor

State of Utah

OFFICE FOR VICTIMS OF CRIME

GARY A. SCHELLER Director, UOVC

June 14, 2017

Susanne Mitchell Salt Lake County CJC 8282 South 2200 West West Jordan, UT 84088-9512

Dear Ms. Mitchell,

The Utah Office for Victims of Crime recently completed the 2017-2019 VOCA grant screening and approval process. The Salt Lake County Children's Justice Center VOCA grant application has been carefully reviewed and will receive \$97,107.26. Grant adjustments will need to be made prior to a final VOCA award being made. To discuss necessary changes, please call Tallie Viteri at 801-297-2620 or email at twitteri@utah.gov to schedule an appointment. Please call or email before Friday, June 23, 2017 to schedule your appointment.

We commend you for developing and implementing victim service programs and look forward to working with you during the 2017-2019 program years.

Sincerely,

Gary Scheller

Director, Utah Office for Victims of Crime

REQUEST FOR BUDGET ADJUSTMENT

| Executive Summary | | |
|--|----------------------------|-----------|
| Reference No: 8200000YE01 | For Fiscal Year: | 2017 |
| Requesting Organization: 82000000 DISTRICT ATTOR | NEY Date of Request: | 21-Jun-17 |
| Budget Adjust Type(s): FTE Request | One Time Change (Y or N): | N |
| New Request | If No, next year's impact: | \$343,367 |
| Description and Instillection. | Net FTE Change: | 5.00 |

Description and Justification:

VOCA- Counseling Services: The District Attorney's Office Counseling Services Unit has been awarded a VOCA grant for a Victim Services Program. The total amount of the two-year grant is \$598,237 and begins July 1, 2017 through June 30, 2019 with possible additional awards at that time. This program will enhance and strengthen our continued implementation of a victim centered approach to prosecution. Five Time-Limited Case Manager positions will provide direct case management services to underserved victims, including court support and advocacy as well as the coordination for other community social service needs. The distribution of this funding will span the remainder of the current budget year 2017, all of 2018 and 6 months of 2019. This budget request is for \$98,248 in spending authority that is required to get the program started and to recognize the revenue that should be received as reimbursement for these expenses. Additional spending authority in both personnel and operating will be required in the amount of \$343,367 for 2018 and the remaining \$156,016 will be required in 2019 with offsetting revenue. No new County funds are requested.

Fund Impact

| SUMMARY OF FUND IMPACT | BY FUND |
|-------------------------|---------------------|
| FUND: | 110 GENERAL FUND |
| Fund impact (Budgetary) | (\$0) |
| Fund Impact (Transfers) | \$0 |
| TOTAL FUND IMPACT | (\$0) |

Mayor Financial Administration

| SUMMARY OF CNTY FUNDING IMPACT B | Y DEPT | | | |
|----------------------------------|---------|---------|-----------|--------------|
| DEPT | REVENUE | EXPENSE | BAL SHEET | CNTY FUNDING |
| 8200000400 CRIMINAL JUSTICE | 98,248 | 98,248 | 0 | 0 |
| TOTALS | 98,248 | 98,248 | 0 | 0 |

| Арр | rovals | | *************************************** |
|---|---|---------|---|
| Division Director: Rua Ashman Digitally signed Date: 2017.06.2 | by Lisa Ashman 1 09:39:43 -06'0 0ate: | | |
| Dept. or Elected Fiscal Mgr: Elizabeth Bayler | syler, o=District k. k.org, c=US Dafa* | | |
| Dept. Dir. or Elected Official: Com Simplification Determined Date: 2017.06.1 | 9 by Sim Gil 21 09:40:25 -06'00' Date: | | ^ |
| Facilities Division Director: (Capital Projects Only) | Date: | | |
| Chief Financial Officer: | Date: | 6/21/17 | |
| Approve | HIGOV | 5/01/12 | |
| Mayor or Designee: | Date: | V101117 | |

Page 1 of 2

| | | | Approve | | | |
|--|---|--|--|--|---------------------------|--|
| ıncil Actioi | n: | | | Date: | | |
| | | | Approve | | | |
| | | Budç | jet Adjustme | nt Detail | | |
| et Year: | 2017 | _ | * Requesting D | epartment: 820000 | 000 DISTRICT ATTORNEY | |
| et Period: Po | ost June Year-End 🔻 | * Reg Item No: | 8200000YE01 - | * Adjustment Title: | VOCA- Counseling Services | |
| tment Type(s): | FTE Request | ~] | New Request | 7 | | |
| Expense Budge | et String(s): | | | | | |
| FUND | AGENCY | SUB-DEPT ID | EXPENSE ACCOUNT | PROG/ACT ID (OPT) | PROJECT ID (CAP) | AMOUNT |
| 110 | 082 | 8200000400 | 601040 | FE007 | | 52,7 |
| 110 | 082 | 8200000400 | 603025 | FE007 | | 9,7 |
| 110 | 082 | 8200000400 | 603040 | FE007 | | 2 |
| 110 | 082 | 8200000400 | 603050 | FE007 | | 20,9 |
| 110 | 082 | 8200000400 | 603005 | FE007 | | 4,0 |
| 440 | 082 | 8200000400 | 601050 | FE007 | | (10,0 |
| 110 | | 8200000400 | 611015 | FE007 | | 2,0 |
| 110 | 082 | | | | | 6 |
| | 082 | 8200000400 | 615020 | FE007 | | |
| 110 | 082 082 | 8200000400 8200000400 | 615020 615025 | FE007 | | 6,0 |
| 110 110 | 082 | 8200000400 | 615020 615025 621020 TOTAL EX | | | 6,0 3,8 \$90,0 |
| 110 110 110 110 110 Revenue Budge | 082 082 082 082 et String(s): | 820000400 820000400 8200000400 | 615020 615025 621020 TOTAL EXPENDITURE | FE007 FE007 KPENDITURE CHANGE: CHANGES (ALL TABS) | BPO ISCT ID (CAD) | 6,0 3,6 \$90,0 \$98,2 |
| 110 110 110 110 110 Revenue Budge | 082 082 082 et String(s): | 820000400 820000400 820000400 8200000400 | 615020 615025 621020 TOTAL EXPENDITURE | FE007 FE007 KPENDITURE CHANGE: CHANGES (ALL TABS) PROG/ACT ID (OPT) | PROJECT ID (CAP) | 6,0 3,6 \$90,0 \$98,2 AMOUNT |
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| 110 110 110 110 110 Revenue Budge | 082 082 082 et String(s): | 820000400 820000400 820000400 8200000400 | 615020 615025 621020 TOTAL EXPENDITURE | FE007 FE007 KPENDITURE CHANGE: CHANGES (ALL TABS) PROG/ACT ID (OPT) | PROJECT ID (CAP) | 6,0 3,0 \$90,0 \$98,2 AMOUNT |
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| 110 110 110 110 110 Revenue Budge | 082 082 082 et String(s): | 820000400 820000400 8200000400 8200000400 | 615020 615025 621020 TOTAL EXPENDITURE | FE007 FE007 KPENDITURE CHANGE: CHANGES (ALL TABS) PROG/ACT ID (OPT) | PROJECT ID (CAP) | 6,0 3,6 \$90,0 \$98,2 AMOUNT |
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| 110 110 110 110 110 Revenue Budge | 082 082 082 et String(s): | 820000400 820000400 8200000400 8200000400 | 615020 615025 621020 TOTAL EXPENDITURE REVENUE ACCOUNT 415000 | FE007 FE007 KPENDITURE CHANGE: CHANGES (ALL TABS) PROG/ACT ID (OPT) FE007 | PROJECT ID (CAP) | 6,0 3,8 \$90,0 \$98,2 AMOUNT 98,2 |
| 110 110 110 110 110 Revenue Budge | 082 082 082 et String(s): | 820000400 820000400 8200000400 8200000400 | 615020 615025 621020 TOTAL EXPENDITURE REVENUE ACCOUNT 415000 | FE007 FE007 KPENDITURE CHANGE: CHANGES (ALL TABS) PROG/ACT ID (OPT) | PROJECT ID (CAP) | 6,0 3,8 \$90,0 \$98,2 AMOUNT 98,2 |
| 110 110 110 110 110 Revenue Budge | 082 082 082 et String(s): AGENCY 082 | 820000400 8200000400 8200000400 SUB-DEPT ID 8200000400 | 615020 615025 621020 TOTAL EXPENDITURE REVENUE ACCOUNT 415000 | FE007 FE007 KPENDITURE CHANGE: CHANGES (ALL TABS) PROG/ACT ID (OPT) FE007 AL REVENUE CHANGE: | PROJECT ID (CAP) | 6,0 3,6 \$90,0 \$98,2 AMOUNT 98,2 |
| 110 110 110 110 110 Revenue Budge FUND | 082 082 082 et String(s): AGENCY 082 String(s): 7 Bal she | 820000400 8200000400 8200000400 SUB-DEPT ID 8200000400 | 615020 615025 621020 TOTAL E) TOTAL EXPENDITURE REVENUE ACCOUNT 415000 TOTAL | FE007 FE007 KPENDITURE CHANGE: CHANGES (ALL TABS) PROG/ACT ID (OPT) FE007 AL REVENUE CHANGE: | PROJECT ID (CAP) | 6,0 3,8 \$90,0 \$98,2 AMOUNT 98,2 |
| 110 110 110 110 110 Revenue Budge FUND 110 Balance Sheet S | 082 082 082 et String(s): AGENCY 082 String(s): 7 Bal she | 820000400 820000400 8200000400 SUB-DEPT ID 8200000400 | 615020 615025 621020 TOTAL E) TOTAL EXPENDITURE REVENUE ACCOUNT 415000 TOTAL | FE007 FE007 KPENDITURE CHANGE: CHANGES (ALL TABS) PROG/ACT ID (OPT) FE007 AL REVENUE CHANGE: ats; check if applicable. | | 6,0 3,6 \$90,0 \$98,2 AMOUNT 98,2 |
| 110 110 110 110 110 Revenue Budge FUND 110 Balance Sheet S | 082 082 082 et String(s): AGENCY 082 String(s): 7 Bal she | 820000400 820000400 8200000400 SUB-DEPT ID 8200000400 | 615020 615025 621020 TOTAL EXPENDITURE REVENUE ACCOUNT 415000 TOTAL TOTAL Froprietary Fund adjustmen BAL. SHEE BAL_SHT BAL SHT | FE007 FE007 KPENDITURE CHANGE: CHANGES (ALL TABS) PROG/ACT ID (OPT) FE007 AL REVENUE CHANGE: ats; check if applicable. | | 6,0 3,6 \$90,0 \$98,2 AMOUNT . 98,2 |
| 110 110 110 110 110 Revenue Budge FUND 110 Balance Sheet S | 082 082 082 et String(s): AGENCY 082 String(s): 7 Bal she | 820000400 820000400 8200000400 SUB-DEPT ID 8200000400 | TOTAL EXPENDITURE REVENUE ACCOUNT 415000 TOTAL Froprietary Fund adjustment BAL. SHEE BAL_SHT BAL_SHT BAL_SHT BAL_SHT | FE007 FE007 KPENDITURE CHANGE: CHANGES (ALL TABS) PROG/ACT ID (OPT) FE007 AL REVENUE CHANGE: ats; check if applicable. | | 6,0 3,6 \$90,0 \$98,2 AMOUNT 98,2 |
| 110 110 110 110 110 Revenue Budge FUND 110 Balance Sheet S | 082 082 082 et String(s): AGENCY 082 String(s): 7 Bal she | 820000400 820000400 8200000400 SUB-DEPT ID 8200000400 | TOTAL EXPENDITURE REVENUE ACCOUNT 415000 TOTAL Froprietary Fund adjustment BAL. SHEE BAL_SHT BAL_SHT BAL_SHT BAL_SHT | FE007 FE007 KPENDITURE CHANGE: CHANGES (ALL TABS) PROG/ACT ID (OPT) FE007 AL REVENUE CHANGE: ats; check if applicable. | | 6,0 3,6 \$90,0 \$98,2 AMOUNT 98,4 |
| 110 110 110 110 110 Revenue Budge FUND 110 Balance Sheet S | 082 082 082 et String(s): AGENCY 082 String(s): 1 Bal she | 820000400 820000400 8200000400 SUB-DEPT ID 8200000400 | TOTAL EXPENDITURE REVENUE ACCOUNT 415000 TOTAL Froprietary Fund adjustment BAL. SHEE BAL_SHT BAL_SHT BAL_SHT BAL_SHT | FE007 FE007 KPENDITURE CHANGE: CHANGES (ALL TABS) PROG/ACT ID (OPT) FE007 AL REVENUE CHANGE: ats; check if applicable. | AMOU | 6,0 3,8 \$90,0 \$98,2 AMOUNT 98,2 |
| # One Tim | 082 082 082 et String(s): AGENCY 082 String(s): Bal she | 820000400 820000400 8200000400 SUB-DEPT ID 8200000400 set strings only required for DEPT ID | TOTAL EXPENDITURE REVENUE ACCOUNT 415000 TOTAL Froprietary Fund adjustment BAL. SHEE BAL_SHT BAL_SHT BAL_SHT TOTAL BALL | FE007 FE007 FE007 KPENDITURE CHANGE: CHANGES (ALL TABS) PROG/ACT ID (OPT) FE007 AL REVENUE CHANGE: ats; check if applicable. T ACCOUNT ANCE SHEET CHANGE: | AMOU | 6,0 3,8 \$90,0! \$98,2. AMOUNT 98,2 |
| # One Tim | 082 082 082 et String(s): AGENCY 082 String(s): 1 Bal she | 820000400 8200000400 8200000400 SUB-DEPT ID 820000400 set strings only required for DEPT ID | TOTAL EXPENDITURE REVENUE ACCOUNT 415000 TOTAL TOTAL REVENUE ACCOUNT 415000 TOTAL Froprietary Fund adjustmen BAL. SHEE BAL_SHT BAL_SHT BAL_SHT TOTAL BALL No. of No. | FE007 FE007 FE007 FE007 FE007 FE007 FE007 FE007 FE007 AL REVENUE CHANGE: TACCOUNT ANCE SHEET CHANGE: No. of New FTEs: | AMOUI | \$98,24 AMOUNT 98,2 \$98,24 |

| From Fund | From Dept ID | To Fund | To Dept ID | Amount |
|-----------|--------------|---------|------------|--------|
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The District Attorney's Office Counseling Services Unit has been awarded a VOCA grant for a Victim Services Program. The total amount of the two-year grant is \$598,237 and begins July 1, 2017 through June 30, 2019 with possible additional awards at that time. This program will enhance and strengthen our services for victims of crime. Five Time-Limited Case Manager positions will provide direct case management services to underserved victims, including court support and advocacy as well as the coordination for other community social service needs. The distribution of this funding will span the remainder of the current budget year 2017, all of 2018 and 6 months of 2019. This budget request is for \$98,248 in spending authority that is required to get the program started and to recognize the revenue that should be received as reimbursement for these expenses. Additional spending authority in both personnel and operating will be required in the amount of \$343,367 for 2018 and the remaining \$156,016 will be required in 2019 with offsetting revenue. No new County funds are requested.

REQUEST FOR INTERIM/JUNE/YEAR-END BUDGET ADJUSTMENT (Additional Detail)

Expense Budget String(s):

| FUND | AGENCY | SUB-DEPT ID | EXPENSE ACCOUNT | PROG/ACT ID (OPT) | PROJECT ID (CAP) | AMOUNT |
|------|--|----------------|---|--|------------------|---|
| 110 | 082 | 8200000400 | 621025 | FE007 | | 900 |
| 110 | 082 | 8200000400 | 615035 | FE007 | | 3,750 |
| 110 | 082 | 8200000400 | 615005 | FE007 | | 500 |
| 10 | 082 | 8200000400 | 609045 | FE007 | | 3,000 |
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| | | | | W. F. C. | | |
| | | | | | | |
| | | | | |] | \$8,150 |

Revenue Budget String(s):

| FUND | AGENCY | SUB-DEPT ID | REVENUE ACCOUNT | PROG/ACT ID (OPT) | PROJECT ID (CAP) | AMOUNT |
|------|--------|---|-----------------|-------------------|------------------|--------|
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Position Management Information

INSTRUCTIONS: Complete one section for each position. To facilitate efficient execution of HR actions, please complete ALL fields as requested. TO fields are required for all position actions while FROM fields only need to be entered for position transfers. Print pages for completed sections and attach to the budget adjustment form.

| Part of the second seco | | | | |
|--|-------------|--|--|---|
| Position 1 | | | | |
| Position Number (For changes to existing positions) | | | 4/0047 | |
| Existing/Proposed Job Start Date | | 9/ | 1/2017 | |
| Existing/Proposed Job Code | | C | 41 | |
| Existing/Proposed Job Title | | Case | Manager | |
| Position Type: Full-Time (FT), Part-Time (PT) | | | FT | |
| Time Limited? Yes / No | | | Yes | |
| If Time Limited, expected expiration date | 6/30/2019 | | | |
| Location Code (four digit number) | 1084 | | | |
| Fund | To: | 110 | From: | 110 |
| PS/BRASS Sub Department Id | To: | 8200000400 | From: | 8200000400 |
| Reports To Position Number | | | 534 | ~ |
| Reports To Job Title | | Victim Counselir | | |
| FTE (Example: .50 / .75 / 1.0) | To: | 1 | From: | 1 |
| Action Type: (New position (N), New TL (TL), Reclassification (R), Transfer | | | | |
| (T), FTE Change/Re-Allocation (RA), Abolish (A), Other (O)) | | | TL | |
| (7), | | | 1 L | |
| Position 2 | | | | *************************************** |
| Position Number (For changes to existing positions) | | ··············· | | |
| Existing/Proposed Job Start Date | | 9/ | 1/2017 | |
| Existing/Proposed Job Code | | | | |
| Existing/Proposed Job Title | | Case | Manager | |
| Position Type: Full-Time (FT), Part-Time (PT) | | | FT | |
| Time Limited? Yes / No | | | Yes | |
| If Time Limited , expected expiration date | | | 0/2019 | |
| Location Code (four digit number) | | | 1084 | |
| | To: | 110 | From: | 110 |
| Fund PS/BRASS Sub Department Id | To: | 82000D0400 | From; | 8200000400 |
| Reports To Position Number | 10. | | 534 | 8200000400 |
| Reports To Job Title | | Victim Counselir | | 2000 |
| FTE (Example: .50 / .75 / 1.0) | To: | 1 | From: | 1 1 |
| | 10. | *************************************** | 110(6), | |
| Action Type: (New position (N), New TL (TL), Reclassification (R), Transfer | | | | |
| (T), FTE Change/Re-Allocation (RA), Abolish (A), Other (O)) | | | -11-1 | |
| | | | TL | |
| Position 3 | | | | |
| | | | | |
| [Position Number (For changes to existing positions] | | | ······································ | · · · · · · · · · · · · · · · · · · · |
| Position Number (For changes to existing positions) | | 9/ | 1/2017 | |
| Existing/Proposed Job Start Date | | 9/ | 1/2017 | |
| Existing/Proposed Job Start Date Existing/Proposed Job Code | | | | |
| Existing/Proposed Job Start Date Existing/Proposed Job Code Existing/Proposed Job Title | | | Manager | |
| Existing/Proposed Job Start Date Existing/Proposed Job Code Existing/Proposed Job Title Position Type: Full-Time (FT), Part-Time (PT) | | | Manager FT | |
| Existing/Proposed Job Start Date Existing/Proposed Job Code Existing/Proposed Job Title Position Type: Full-Time (FT), Part-Time (PT) Time Limited? Yes / No | | Case | Manager FT Yes | |
| Existing/Proposed Job Start Date Existing/Proposed Job Code Existing/Proposed Job Title Position Type: Full-Time (FT), Part-Time (PT) Time Limited? Yes / No If Time Limited, expected expiration date | | Case | Manager FT Yes 0/2019 | |
| Existing/Proposed Job Start Date Existing/Proposed Job Code Existing/Proposed Job Title Position Type: Full-Time (FT), Part-Time (PT) Time Limited? Yes / No If Time Limited , expected expiration date Location Code (four digit number) | To | Case | Manager FT Yes 0/2019 | 110 |
| Existing/Proposed Job Start Date Existing/Proposed Job Code Existing/Proposed Job Title Position Type: Full-Time (FT), Part-Time (PT) Time Limited? Yes / No If Time Limited, expected expiration date Location Code (four digit number) Fund | To: | 6/3 | Manager FT Yes 0/2019 1084 From: | 110 |
| Existing/Proposed Job Start Date Existing/Proposed Job Code Existing/Proposed Job Title Position Type: Full-Time (FT), Part-Time (PT) Time Limited? Yes / No If Time Limited, expected expiration date Location Code (four digit number) Fund PS/BRASS Sub Department Id | To: To: | Case 6/3 110 820000400 | Manager FT Yes 60/2019 1084 From: From: | 110 8200000400 |
| Existing/Proposed Job Start Date Existing/Proposed Job Code Existing/Proposed Job Title Position Type: Full-Time (FT), Part-Time (PT) Time Limited? Yes / No If Time Limited, expected expiration date Location Code (four digit number) Fund PS/BRASS Sub Department Id Reports To Position Number | | Case 6/3 110 8200000400 | Manager FT Yes 60/2019 1084 From: From: | 8200000400 |
| Existing/Proposed Job Start Date Existing/Proposed Job Code Existing/Proposed Job Title Position Type: Full-Time (FT), Part-Time (PT) Time Limited? Yes / No If Time Limited, expected expiration date Location Code (four digit number) Fund PS/BRASS Sub Department Id Reports To Position Number Reports To Job Title | To: | Case 6/3 110 8200000400 Victim Counselir | Manager FT Yes 0/2019 1084 From: From: 534 | 8200000400 ager |
| Existing/Proposed Job Start Date Existing/Proposed Job Code Existing/Proposed Job Title Position Type: Full-Time (FT), Part-Time (PT) Time Limited? Yes / No If Time Limited, expected expiration date Location Code (four digit number) Fund PS/BRASS Sub Department Id Reports To Position Number Reports To Job Title FTE (Example: 50 / .75 / 1.0) | | Case 6/3 110 8200000400 | Manager FT Yes 60/2019 1084 From: From: | 8200000400 |
| Existing/Proposed Job Start Date Existing/Proposed Job Code Existing/Proposed Job Title Position Type: Full-Time (FT), Part-Time (PT) Time Limited? Yes / No If Time Limited, expected expiration date Location Code (four digit number) Fund PS/BRASS Sub Department Id Reports To Position Number Reports To Job Title FTE (Example: .50 / .75 / 1.0) Action Type: (New position (N), New TL (TL), Reclassification (R), Transfer | To: | Case 6/3 110 8200000400 Victim Counselir | Manager FT Yes 0/2019 1084 From: From: 534 | 8200000400 ager |
| Existing/Proposed Job Start Date Existing/Proposed Job Code Existing/Proposed Job Title Position Type: Full-Time (FT), Part-Time (PT) Time Limited? Yes / No If Time Limited, expected expiration date Location Code (four digit number) Fund PS/BRASS Sub Department Id Reports To Position Number Reports To Job Title FTE (Example: 50 / .75 / 1.0) | To: | Case 6/3 110 8200000400 Victim Counselir | Manager FT Yes 10/2019 1084 From: From: 534 1g Program Man From: | 8200000400 ager |
| Existing/Proposed Job Start Date Existing/Proposed Job Code Existing/Proposed Job Title Position Type: Full-Time (FT), Part-Time (PT) Time Limited? Yes / No If Time Limited, expected expiration date Location Code (four digit number) Fund PS/BRASS Sub Department Id Reports To Position Number Reports To Job Title FTE (Example: .50 / .75 / 1.0) Action Type: (New position (N), New TL (TL), Reclassification (R), Transfer | To: | Case 6/3 110 8200000400 Victim Counselir | Manager FT Yes 0/2019 1084 From: From: 534 | 8200000400 ager |
| Existing/Proposed Job Start Date Existing/Proposed Job Code Existing/Proposed Job Title Position Type: Full-Time (FT), Part-Time (PT) Time Limited? Yes / No If Time Limited, expected expiration date Location Code (four digit number) Fund PS/BRASS Sub Department Id Reports To Position Number Reports To Job Title FTE (Example: 50 / .75 / 1.0) Action Type: (New position (N), New TL (TL), Reclassification (R), Transfer (T), FTE Change/Re-Allocation (RA), Abolish (A), Other (O)) | To: | Case 6/3 110 8200000400 Victim Counselir | Manager FT Yes 10/2019 1084 From: From: 534 109 Program Man From: | 8200000400 ager |
| Existing/Proposed Job Start Date Existing/Proposed Job Code Existing/Proposed Job Title Position Type: Full-Time (FT), Part-Time (PT) Time Limited? Yes / No If Time Limited, expected expiration date Location Code (four digit number) Fund PS/BRASS Sub Department Id Reports To Position Number Reports To Job Title FTE (Example: 50 / .75 / 1.0) Action Type: (New position (N), New TL (TL), Reclassification (R), Transfer (T), FTE Change/Re-Allocation (RA), Abolish (A), Other (O)) Total No. of New FTEs: | To: | Case 6/3 110 8200000400 Victim Counselir | Manager FT Yes 10/2019 1084 From: From: 534 19 Program Man From: | 8200000400 ager |
| Existing/Proposed Job Start Date Existing/Proposed Job Code Existing/Proposed Job Title Position Type: Full-Time (FT), Part-Time (PT) Time Limited? Yes / No If Time Limited, expected expiration date Location Code (four digit number) Fund PS/BRASS Sub Department Id Reports To Position Number Reports To Job Title FTE (Example: 50 / 75 / 1.0) Action Type: (New position (N), New TL (TL), Reclassification (R), Transfer (T), FTE Change/Re-Allocation (RA), Abolish (A), Other (O)) Total No. of New FTEs: Total No. of New Time Limited FTEs: | To: | Case 6/3 110 8200000400 Victim Counselir | Manager FT Yes 10/2019 1084 From: From: 534 19 Program Man From: TL 0 5 | 8200000400 ager |
| Existing/Proposed Job Start Date Existing/Proposed Job Code Existing/Proposed Job Title Position Type: Full-Time (FT), Part-Time (PT) Time Limited? Yes / No If Time Limited, expected expiration date Location Code (four digit number) Fund PS/BRASS Sub Department Id Reports To Position Number Reports To Job Title FTE (Example: 50 / .75 / 1.0) Action Type: (New position (N), New TL (TL), Reclassification (R), Transfer (T), FTE Change/Re-Allocation (RA), Abolish (A), Other (O)) Total No. of New FTEs: Total No. of New Time Limited FTEs: Total No. of Transferred FTEs: | To: | Case 6/3 110 8200000400 Victim Counselir | Manager FT Yes 0/2019 1084 From: From: 534 19 Program Man From: TL 0 5 0 | 8200000400 ager |
| Existing/Proposed Job Start Date Existing/Proposed Job Code Existing/Proposed Job Title Position Type: Full-Time (FT), Part-Time (PT) Time Limited? Yes / No If Time Limited, expected expiration date Location Code (four digit number) Fund PS/BRASS Sub Department Id Reports To Position Number Reports To Job Title FTE (Example: 50 / .75 / 1.0) Action Type: (New position (N), New TL (TL), Reclassification (R), Transfer (T), FTE Change/Re-Allocation (RA), Abolish (A), Other (O)) Total No. of New FTEs: Total No. of New Time Limited FTEs: | To: | Case 6/3 110 8200000400 Victim Counselir | Manager FT Yes 10/2019 1084 From: From: 534 19 Program Man From: TL 0 5 | 8200000400 ager |

(a) Totals will transfer to the "Adj Request" tab's FTE section.

| Council Approval section below to be completed only by Council Sta | ff and to be submitted to | HR for final process | ing. |
|--|---------------------------|----------------------|------|
| | | | |
| | | | |
| Council Approved: Yes: No: Date: | Signa | iure, | |

Page 2

| Position 4 | | | | 7 |
|---|-----|-------------|----------------|------------|
| Position Number (For changes to existing positions) | | | | |
| Existing/Proposed Job Start Date | | | 9/1/2017 | |
| Existing/Proposed Job Code | } | | | - |
| Existing/Proposed Job Title | | C | ase Manager | |
| Position Type: Full-Time (FT), Part-Time (PT) | | | FT | |
| Time Limited? Yes / No | | | Yes | * |
| If Time Limited, expected expiration date | | | 6/30/2019 | |
| Location Code (four digit number) | | | 1084 | |
| Fund | То: | 110 | From: | 110 |
| PS/BRASS Sub Department Id | To: | 8200000400 | From: | 8200000400 |
| Reports To Position Number | | | 534 | |
| Reports To Job Title | | Victim Coun | seling Program | Manager |
| FTE (Example: .50 / .75 / 1.0) | To: | 1 | From; | 1 |
| Action Type: (New position (N), New TL (TL), Reclassification (R), Transfer (T), FTE Change/Re-Allocation (RA), Abolish (A), Other (O)) | | | TL | |

| Position 5 | | | ······································ | |
|---|-----|-------------|--|------------|
| Position Number (For changes to existing positions) | | | | |
| Existing/Proposed Job Start Date | | | 9/1/2017 | |
| Existing/Proposed Job Code | | | | |
| Existing/Proposed Job Title | | С | ase Manager | |
| Position Type: Full-Time (FT), Part-Time (PT) | | | FΥ | * |
| Time Limited? Yes / No | | | Yes | |
| If Time Limited, expected expiration date | | | 6/30/2019 | |
| Location Code (four digit number) | | | 1084 | |
| Fund | To: | 110 | From: | 110 |
| PS/BRASS Sub Department Id | To: | 8200000400 | From: | 8200000400 |
| Reports To Position Number | | | 534 | |
| Reports To Job Title | | Victim Coun | seling Program | Manager |
| FTE (Example: .50 / .75 / 1.0) | To: | 11 | From: | 1 |
| Action Type: (New position (N), New TL (TL), Reclassification (R), Transfer (T), FTE Change/Re-Allocation (RA), Abolish (A), Other (O)) | | | TL. | |

| Position 6 | | | | | |
|---|-----|-------|--|--|--|
| Position Number (For changes to existing positions) | | | | | |
| Existing/Proposed Job Start Date | | | | | |
| Existing/Proposed Job Code | | | | | |
| Existing/Proposed Job Title | | | | | |
| Position Type: Full-Time (FT), Part-Time (PT) | | | | | |
| Time Limited? Yes / No | | | | | |
| If Time Limited, expected expiration date | | | | | |
| Location Code (four digit number) | | | | | |
| Fund | To: | From: | | | |
| PS/BRASS Sub Department Id | То: | From: | | | |
| Reports To Position Number | | | | | |
| Reports To Job Title | | | | | |
| FTE (Example: .50 / .75 / 1.0) | To: | From: | | | |
| Action Type: (New position (N), New TL (TL), Reclassification (R), Transfer | | | | | |
| (T), FTE Change/Re-Allocation (RA), Abolish (A), Other (O)) | | | | | |



GARY R. HERBERT

SPENCER J. COX Lieutenant Governor

State of Utah

OFFICE FOR VICTIMS OF CRIME

GARY A. SCHELLER Director, UOVC

June 14, 2017

Lorianne Szendre Salt Lake County District Attorney's Office 2001 South State Street S3-600 Salt Lake City, UT 84190-0001

Dear Ms. Szendre,

The Utah Office for Victims of Crime recently completed the 2017-2019 VOCA grant screening and approval process. The Salt Lake County District Attorney's Office VOCA grant application has been carefully reviewed and will receive \$598,237.00. Grant adjustments will need to be made prior to a final VOCA award being made. To discuss necessary changes, please call Tallie Viteri at 801-297-2620 or email at tviteri@utah.gov to schedule an appointment. Please call or email before Friday, June 23, 2017 to schedule your appointment.

We commend you for developing and implementing victim service programs and look forward to working with you during the 2017-2019 program years.

Gary Scheller

inserely.

Director, Utah Office for Victims of Crime

15,00

2017

15-Jun-17

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0.00

\$0

For Fiscal Year:

Date of Request:

Net FTE Change:

One Time Change (Y or N):

If No, next year's impact:

REQUEST FOR BUDGET ADJUSTMENT

Combination of ECC HVAC PH1 & PH2 Capital Proj.: Emergency Operations Center HVAC Renovation Phase I to combine Emergency Operations Center Chiller Phase II into one fund. Due

Executive Summary

Reference No: 505000 YE_OI

Budget Adjust Type(s): Existing Capital Project

Description and Justification:

Requesting Organization: 50500000 CAPITAL IMPROVEME

| to the 24/7 operational needs of the Emer various operations functional during the or in tandem to the HVAC renovation project anticipated and has since been temporaril impacts, the Childre unit was Change Order articipated to be Change Ordered to KM. | onstruction period. This work i t is the engineering and design by repaired to run at fifty perce ered to KHI Mechanical so the | s being performed n phase of the repla nt capacity. To exp chilter could be on | by the awarded contractor KHs cement Chiller project which w edite the emergency need of the dered immediately. The remain | nto 8 separate zones of c Mechanical. vas funded for 2017, In Aj ne replacement Chiller un later of Phase II engineeri | orii the Chiller failed far ea It and to help manage and | building to keep fier than mitigate lead time |
|--|--|---|--|--|---|---|
| anticipated to be Change Ordered to KHI contract modifications to KHI Mechanical | mechanical while still on-site of and to assure the on-going an | completing Phase I. nd uninterrupted ope | As currently funded Phase I a eration of the EOC. | and Phase II need to be o | combined to anticipate the | up-coming |
| | | | | 7 | | |
| | | Fund | Impact | | | |
| SUMMARY OF FUND IMPACT | BY FUND | | | | | |
| FUND: | 450 CAPITAL | | | | | |
| | IMPROVEMENT | S 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 | officers.of | 28 A | |
| | | Appr | ovals | | | |
| Division Director: | | 200.10 | 1 | Date: 6/15 | डोग | |
| Dept. or Elected Fiscal Mgr | : Javaid V | N. Lal | a Company of the Comp | Date: 06/20/ | 2017 | |
| Dept. Dir. or Elected Officia | | - | ng palakan maka | Date: 6/14 | 7/17 | |
| Facilities Division Director: Capital Projects Only) | | | <u></u> | Date: Lo/1 | 5 17 | - Olan |
| Chief Financial Officer: | X AL | prove | | Date: 6/2 | 1/17 | |
| flayor or Designee: | Chin | pprove | Vaek | Date: | 01117 | |
| Council Action: | | | | Date: | | |

Approve

| | | Budg | jet Adjustmer | nt Detail | | |
|------------------|---------------------------------------|--------------------|--|---|---------------------------|---|
| et Year: | 2017 | ma-uj | * Requesting De | | 0000 CAPITAL IMPROVEM | ENTS |
| et Period: June | • • • • • • • • • • • • • • • • • • • | ∮ ≉ Req !tem No: | 505000 | * Adjustment Title: | Combination of ECC HVAC I | PH1 & PH2 Capital Proj |
| tment Type(s): | Existing Capital Pro | ject - | 1 | - | | · · · · · |
| Expense Budget | String(s): | | | | | |
| FUND | AGENCY | SUB-DEPT ID | EXPENSE ACCOUNT | PROG/ACT ID (OPT) | | AMOUNT |
| 450 | 050 | 5050000000 | 607015 | | FAC137C 02EO | (330,4 |
| 450 | 050 | 5050000000 | 607010 | | OZEO | 350,4 |
| | | | | | | |
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| | | 1 | | PENDITURE CHANGE | | |
| Revenue Budget | AGENCY | SUB-DEPT ID | REVENUE ACCOUNT | PROG/ACT ID (OPT) | PROJECT ID (CAP) | AMOUNT |
| FOND | AGLACT | 300-00-1-0 | | | | |
| | - Walanda (AA-402A | | | | | |
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| | | | | | | |
| | | | | | | |
| | | | TOTAL | L REVENUE CHANGE | | |
| Balance Sheet/Fu | and Unrestriction | String(s): - Balsi | neet strings only required for P | | | |
| FUND | SUE | 3-DEPT ID | | T ACCOUNT | OMA | UNT |
| | | | BAL SHT or 499999 BAL SHT or 499999 | | | |
| | | | BAL_SHT or 499999 | | | |
| | | | TOTAL BALA | ANCE SHEET CHANGE | | ±1303931020000000000000000000000000000000 |
| | Change (Y or N): | | | No. of New FTEs: | | (2) |
| If No, ne | ext year's impact: | · | | w Time Limited FTEs: o. of Transferred FTEs: | | (2) |
| | | | NC | No. of Other FTEs: | | (2) (2) |
| Fund Balance Tra | ınsfers: | | | | | • |
| From Fund | From Dept ID | To Fund | To Dept ID | Amount | - | |
| | | | | - | - | |
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Emergency Operations Center HVAC Renovation Phase I to combine Emergency Operations Center Chiller Phase II into one fund. Due to the 24/7 operational needs of the Emergency Operations Center, Phase I of the major HVAC renovation was phased into 8 separate zones of construction throughout the building to keep various operations functional during the construction period. This work is being performed by the awarded contractor KHI Mechanical.

work is being performed by the awarded contractor KHI Mechanical.

In tandem to the HVAC renovation project is the engineering and design phase of the replacement Chiller project which was funded for 2017. In April the Chiller failed far earlier than anticipated and has since been temporarily repaired to run at lifty percent capacity. To expedite the emergency need of the replacement Chiller unit and to help manage and mitigate lead time impacts, the Chillier unit was Change Ordered to KHI Mechanical so the Chiller could be ordered immediately. The remainder of Phase II engineering and design is being finalized and is anticipated to be Change Ordered to KHI Mechanical while still on-site completing Phase I. As currently funded Phase I and Phase II need to be combined to anticipate the up-coming contract modifications to KHI Mechanical and to assure the on-going and uninterrupted operation of the EOC.

15,7

REQUEST FOR BUDGET ADJUSTMENT

| Executive Summary | | |
|--|----------------------------|-----------|
| Reference No: 505000##2 YE_02- | For Fiscal Year: | 2017 |
| Requesting Organization: 50500000 CAPITAL IMPROV | /EME Date of Request: | 15-Jun-17 |
| Budget Adjust Type(s): Existing Capital Project | One Time Change (Y or N): | Y |
| | If No, next year's impact: | \$0 |
| | Net FTE Change: | 0.00 |
| Description and Justification: | _ | |

Reallocate Capital Sheriff Parking Project: The Sheriff's Office Building was funded for a Slurry Coating project for 2017. Costs for this projects scope of work have exceeded the funds available by \$8,467.00. Funding for the same type of project was received for the Oxbow Jail, these costs for this projects scope of work have come in under by \$17,723.00. It is requested to budget adjust \$10,000.00 from the under spent portion of the Oxbow Jail fund and supplement the S.O.B. project with the required funding.

Fund Impact

| SUMMARY OF FUND IMPACT BY FUND | | | | |
|--------------------------------|-------------------|--|--|--|
| FUND: 450 CAPITAL | | | | |
| | IMPROVEMENTS 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 |

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| | Approvals | |
|---|-----------------------------|------------------|
| Division Director: | | Date: 6/15/17 |
| Dept. or Elected Fiscal Mgr: | Javaid M. Lal | Date: 06/20/2017 |
| Dept. Dir. or Elected Official: | AMA | Date: 6/19/17 |
| Facilities Division Director: (Capital Projects Only) | | Date: 6/15/17 |
| Chief Financial Officer: | Lah | Date: 6/21/17 |
| Mayor or Designee: | Approve X Approve Approve | Date: 6(0)117 |
| Council Action: | | Date: |
| | Approve | |

| | | | get Adjustmer | | | |
|----------------------|--|--------------------------|---|--|--|--|
| t Year: | 2017 | <u>-</u> - | * Requesting Do | * + a' * | 0000 CAPITAL IMPROVEMEN | VTS |
| t Period: Jur | ne | Req Item No: | 505000 | * Adjustment Title: | Reallocate Capital Sheriff Park | ing Project |
| tment Type(s): | Existing Capital Pro | pjact | | | | |
| Expense Budget | String(s): | | | | | |
| FUND | AGENCY | SUB-DEPT ID | EXPENSE ACCOUNT | PROG/ACT ID (OPT) | PROJECT ID (CAP) SHF90 | AMOUNT |
| 450 450 | 050 050 | 5050000000 5050000000 | 607015 607015 | and the second s | SHF92 | (10,0 10,0 |
| 400 | 030 | 505000000 | 807713 | | 011 02 | 10,0 |
| ,,,,, | | | | | | |
| | A A A A A A A A A A A A A A A A A A A | | | | | |
| | | | | | | |
| | | | TOTAL EX | PENDITURE CHANGE: | | |
| Revenue Budget | | | | | | |
| FUND | AGENCY | SUB-DEPT ID | REVENUE ACCOUNT | PROG/ACT ID (OPT) | PROJECT ID (CAP) | AMOUNT |
| | | | | | | |
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| | 10-20-00-0 | - | - | 9040-91-940-940-9-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1- | | |
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| | | | | | | |
| | | | ATOT | L REVENUE CHANGE: | 92005 | ROS PARTY. |
| Balance Sheet/Fu | und Unrestriction | String(s): - Balst check | TOTA meet strings only required for Pri | | 2)205 | |
| Balance Sheet/Ft | | String(s): - Balst check | | oprietary Fund adjustments | 2)205 | |
| | | | eet strings only required for Pr if applicable. BAL. SHEET BAL SHT or 499999 | oprietary Fund adjustments | or fund unrestrictions; | |
| | | | eet strings only required for Prif applicable. BAL. SHEE BAL. SHT or 499999 BAL. SHT or 499999 | oprietary Fund adjustments | or fund unrestrictions; | |
| | | | BAL SHT or 499999 BAL SHT or 499999 BAL SHT or 499999 | oprietary Fund adjustments | or fund unrestrictions; | TT. |
| | | | BAL SHT or 499999 BAL SHT or 499999 BAL SHT or 499999 | oprietary Fund adjustments | or fund unrestrictions; | T. |
| FUND | SUB | S-DEPT ID | BAL SHT or 499999 | oprietary Fund adjustments | or fund unrestrictions; | TT STATE OF THE ST |
| FUND * One Time | SUB Change (Y or N): | -DEPT ID | BAL SHT or 499999 | Oprietary Fund adjustments FACCOUNT WEESHEET CHANGE: | or fund unrestrictions; AMOUN 0.00 (2) | \$ |
| FUND * One Time | SUB | -DEPT ID | BAL. SHEE BAL SHT or 499999 BAL SHT or 499999 BAL SHT or 499999 BAL SHT or 499999 TOTAL BALA | T ACCOUNT NCE SHEET CHANGE: No. of New FTEs: | 0.00 (2) | |
| * One Time | Change (Y or N): ext year's impact: | -DEPT ID | BAL. SHEE BAL SHT or 499999 BAL SHT or 499999 BAL SHT or 499999 BAL SHT or 499999 TOTAL BALA | TACCOUNT NCE SHEET CHANGE: No. of New FTEs: w Time Limited FTEs: | 0.00 (2) | |
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The Sheriff's Office Building was funded for a Slurry Coating project for 2017. Costs for this projects scope of work have exceeded the funds available by \$8,467.00. Funding for the same type of project was received for the Oxbow Jail, these costs for this projects scope of work have come in under by \$17,723.00. It is requested to budget adjust \$10,000.00 from the under spent portion of the Oxbow Jail fund and supplement the S.O.B. project with the required funding.

19.8

2017

15-Jun-17

Y

0.00

\$0

For Fiscal Year:

Date of Request:

Net FTE Change:

One Time Change (Y or N):

If No, next year's impact:

REQUEST FOR BUDGET ADJUSTMENT

SHF magnetic door lock Capital project: The Metro Jail is approaching 16 years of age and was developed using magnetic door locks in high security areas. 20

Fund Impact

malfunctioning and repair parts are unavailable due to age. To prevent injuries to prisoners or staff these door locks will need to be redesigned and retro fitted. The elevator project is coming in under budget so we have some room to reallocate budget to complete the ADC's magnetic door lock capital

Executive Summary

Reference No: 505000 YE YE 03

Requesting Organization: 50500000 CAPITAL IMPROVEME

450 CAPITAL

Budget Adjust Type(s): Existing Capital Project

Description and Justification:

SUMMARY OF FUND IMPACT BY FUND

of the doors are currently

FUND:

| | IMPROVEMENTS FUND | | | |
|--|-------------------|--|---|--|
| Fund Impact (Budgetary) | \$0 | | | |
| Fund Impact (Transfers) | \$0 | | | |
| TOTAL FUND IMPACT | \$0 | | | |
| | | | | |
| SUMMARY OF CNTY FUNDING I | MPACT BY DEPT | | | |
| DEPT | REVENUE | EXPENSE | BAL SHEET | CNTY FUNDING |
| TOTALS | | 0 | 0 | 0 |
| | | | | |
| ************************************** | Appro | vale | | |
| | Appio | 7413 | | |
| Division Director: | | | Date: la \ | 5/17 |
| | | | Anchoramica and and the section of the section of | |
| Dept. or Elected Fiscal Mgr: | Javaid M. Lal | 19.44 (A. | Date: 06/20/ | /2017 |
| Done Die es Elected Officials | Malle. | | 2-4 (- / | 1, 1, |
| Dept. Dir. or Elected Official: | | | Date:/ | 19/17 |
| Facilities Division Director: | | | Date: \ | < 0 |
| (Capital Projects Only) | | annana va esperante espera | | |
| | (1 /// /a | | 11 | |
| Chief Financial Officer: | | | Date: 6/2 | 41/(F |
| | Approve | | | |
| Mayor or Designee: | ThendItVa | UK_ | Date: | 01117 |
| majo: or moorgines. | Approve | - | vatt. | - 1 · |
| | | | | |
| Council Action: | | | Date: | |
| | Approve | | | and the state of t |
| | | | | |

| | | Budç | get Adjustmer | nt Detail | | |
|------------------|--|---|--|--|--|--|
| t Year: | 2017 | MC14* | * Requesting Do | | 0000 CAPITAL IMPROVEM | ENTS |
| t Period: june | | * Req Item No: | YE - 03 | * Adjustment Title: | SHF magnetic door lock Car | aital project |
| iment Type(s): | Existing Capital Pro | iject 💌 🛂 | | | | |
| Expense Budget S | String(s): | | | | | |
| FUND | AGENCY | SUB-DEPT ID | EXPENSE ACCOUNT | PROGIACT ID (OPT) | | AMOUNT |
| 450 | 050 | 5050000000 | 607015 | | FAC127C | (14,684 |
| 450 | 050 | 5050000000 | 607015 | | FAC121C | 14,684 |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | TOTAL EX | PENDITURE CHANGE | | \$0 |
| | | | , • | | | |
| Revenue Budget | String(s): | | | | | |
| FUND | AGENCY | SUB-DEPT ID | REVENUE ACCOUNT | PROG/ACT ID (OPT) | PROJECT ID (CAP) | AMOUNT |
| | | | | | | |
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| | | | | | | <u></u> |
| | and the state of t | | | | | |
| | | | | | | |
| | Jane 1990 (149) | | | | | \$0 |
| Balance Sheet/Fu | and Unrestriction | String(s): Baisi check | heet strings only required for P | | s or fund unrestrictions; | COLO MARCO MILLON MARCO |
| FUND | SUI | 3-DEPT ID | BAL. SHEE | TACCOUNT | AMO | UNT |
| | | | BAL_SHT or 499999 | | Al Longitude Commence of the C | |
| | | | BAL_SHT or 499999 BAL_SHT or 499999 | Andrew Control of the Angree of the State of | | |
| <u>i</u> | | | | ANCE SHEET CHANGE | : | \$0 |
| | | | | No. of New FTEs: | : 0.00 | (2) |
| | Change (Y or N) | | No. of No | w Time Limited FTEs: | | (2) |
| n No, ne | ext years impact | 43 1-4-20-14- | | o. of Transferred FTEs: | | (2) |
| | | | | No. of Other FTEs: | | (2) |
| Fund Balance Tra | ansfers: | | | | | |
| From Fund | From Dept ID | To Fund | To Dept ID | Amount | 7 | |
| From Fund | 1.1 OILL PART IN | .v. unu | | | - | |
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| | | | | | | |

The Metro Jail is approaching 16 years of age and was developed using magnetic door locks in high security areas. 20 of the doors are currently malfunctioning and repair parts are unavailable due to age. To prevent injuries to prisoners or staff these door locks will need to be redesigned and retro fitted. The elevator project is coming in under budget so we have some room to reallocate budget to complete the ADC's magnetic door lock capital project.



REQUEST FOR BUDGET ADJUSTMENT

| Executive Summary | | |
|---|-------------------------|-----------|
| Reference No: 107099YE02 | For Fiscal Year: | 2017 |
| Requesting Organization: 10709900 PARKS AND REC CAP | Date of Request: | 21-Jun-17 |
| Budget Adjust Type(s): Existing Capital Project One | Time Change (Y or N): | Υ |
| Appropriation Unit Shift If N | lo, next year's impact: | \$0 |
| | Net FTE Change: | 0.00 |

Description and Justification:

Parks & Recreation TRCC Project Adjustments: In 2016, Parks & Recreation began capital projects to install a new multipurpose field at JL Sorenson Recreation Center in Herriman (PAR16JLRC01), and to replace the existing irrigation system at Tanner Park in Salt Lake City (PAR16TNPK03). Both projects were rebudgeted in 2017 to complete construction. When construction bids came in, the bids were under budget and the projects will have available budget once construction is complete for the current scope. Parks & Recreation requests scope changes to both projects to complete other improvements to grounds at the respective sites: \$90,000 for landscape improvements at JL Sorenson, and \$70,000 for pavilion replacement and ADA improvements at Tanner. The improvements at Tanner Park would use the same account code as the existing expenditure budget, so no adjustment is requested, only a scope change. No new funding is requested.

Fund Impact

| SUMMARY OF FUND IMPACT | T BY FUND |
|-------------------------|--|
| FUND: | 181 TRCC TOURISM REC CULTRL CONVEN 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: Multiplenous | Date: |
| Dept. or Elected Fiscal Mgr: | Date: 6 - 21 - 17 |
| Dept. Dir. or Elected Official: Wall M. 4009 | Date: 4.21.17 |
| Facilities Division Director: | Date: |
| (Capital Projects Only) | |
| Chief Financial Officer: Approve | Date: 4:01.17 |
| Mayor or Designee: Approve | Date: 6.21.17 |
| Council Action: | Date: |

| | t Period: | .,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | Budg | get Adjustme | nt Detail | | |
|--|-------------|---|----------------|---------------------------------------|---------------------|-----------------------------|------------------|
| Post June Year-End | t Period: | .,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | it Detail | | |
| Appropriate Data String(s): Expense Budget String(s): | ment Type(s | | | * Requesting D | epartment: 107 | 09900 PARKS AND REC CAPI | TAL IMPROVEMENT |
| Expense Budget String(s): | | Post June Year-End • | * Req Item No: | splgmody.e | * Adjustment Title: | Parks & Recreation TRCC Pro | ject Adjustments |
| FUND AGENCY SUB-DEPT ID EXPENSE ACCOUNT PROGRACT ID (OPT) PROJECT ID (CAP) AMOUNT | Evanas D. | Existing Capital Project | | Appropriation Unit Shift | | | |
| 181 | Exhense on | dget String(s): | | | | | |
| 181 030 | FUND | AGENCY | SUB-DEPT ID | EXPENSE ACCOUNT | PROG/ACT ID (OP) | F) PROJECT ID (CAP) | AMOUNT |
| Revenue Budget String(s): FUND AGENCY SUB-DEPT ID REVENUE ACCOUNT PROG/ACT ID (OPT) PROJECT ID (CAP) AMOUNT | 181 | 030 | 1070990000 | 673020 | | | (90,0 |
| Revenue Budget String(s): FUND AGENCY SUB-DEPT ID REVENUE ACCOUNT PROGIACT ID (OPT) PROJECT ID (CAP) AMOUNT | 181 | 030 | 1070990000 | 607010 | | PAR16JLRC01 | 90,0 |
| Revenue Budget String(s): FUND AGENCY SUB-DEPT ID REVENUE ACCOUNT PROG/ACT ID (OPT) PROJECT ID (CAP) AMOUNT | | | | | | | |
| Revenue Budget String(s): FUND AGENCY SUB-DEPT ID REVENUE ACCOUNT PROG/ACT ID (OPT) PROJECT ID (CAP) AMOUNT | | | | | | | |
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| Revenue Budget String(s): FUND AGENCY SUB-DEPT ID REVENUE ACCOUNT PROG/ACT ID (OPT) PROJECT ID (CAP) AMOUNT | | | | | | | |
| Revenue Budget String(s): FUND AGENCY SUB-DEPT ID REVENUE ACCOUNT PROG/ACT ID (OPT) PROJECT ID (CAP) AMOUNT | | | | | | | |
| Revenue Budget String(s): FUND AGENCY SUB-DEPT ID REVENUE ACCOUNT PROG/ACT ID (OPT) PROJECT ID (CAP) AMOUNT | | | | | | | |
| Revenue Budget String(s): FUND AGENCY SUB-DEPT ID REVENUE ACCOUNT PROG/ACT ID (OPT) PROJECT ID (CAP) AMOUNT | | | | | | | |
| Revenue Budget String(s): FUND AGENCY SUB-DEPT ID REVENUE ACCOUNT PROG/ACT ID (OPT) PROJECT ID (CAP) AMOUNT | | | | | | | ····· |
| FUND AGENCY SUB-DEPT ID REVENUE ACCOUNT PROG/ACT ID (OPT) PROJECT ID (CAP) AMOUNT TOTAL REVENUE CHANGE: Balance Sheet String(s): F Bal sheet strings only required for Proprietary Fund adjustments; check if applicable. FUND SUB-DEPT ID BAL SHEET ACCOUNT AMOUNT BAL SHT BAL SHT BAL SHT BAL SHT BAL SHT TOTAL BALANCE SHEET CHANGE: * One Time Change (Y or N): Y No. of New FTEs: 0.00 (2) No. of Transferred FTEs: 0.00 (2) No. of Transferred FTEs: 0.00 (2) | | | | TOTAL EX | PENDITURE CHANG | E: | |
| Balance Sheet String(s): Bal sheet strings only required for Proprietary Fund adjustments; check if applicable. FUND SUB-DEPT ID BAL. SHEET ACCOUNT AMOUNT | FUND | AGENCY | SUB-DEPT ID | REVENUE ACCOUNT | PROG/ACT ID (OP | PROJECT ID (CAP) | AMOUNT |
| Balance Sheet String(s): F Bal sheet strings only required for Proprietary Fund adjustments; check if applicable. FUND SUB-DEPT ID BAL. SHEET ACCOUNT AMOUNT | | | | | | | |
| Balance Sheet String(s): FBal sheet strings only required for Proprietary Fund adjustments; check if applicable. FUND SUB-DEPT ID BAL. SHEET ACCOUNT AMOUNT BAL_SHT BAL_SHT TOTAL BALANCE SHEET CHANGE: * One Time Change (Y or N): Y No. of New FTEs: 0.00 (2) If No, next year's impact: \$0 No. of New Time Limited FTEs: 0.00 (2) No. of Transferred FTEs: 0.00 (2) | | | | | | | |
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| * One Time Change (Y or N): Y No. of New FTEs: 0.00 (2) If No, next year's impact: \$0 No. of New Time Limited FTEs: 0.00 (2) No. of Transferred FTEs: 0.00 (2) | | | | | | | |
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| If No, next year's impact: \$0 No. of New Time Limited FTEs: 0.00 (2) No. of Transferred FTEs: 0.00 (2) | · 01 | ima Changa (V or N) | V | | No. of Now ETE | | 01 |
| No. of Transferred FTEs: 0.00 (2) | | | | - No ath- | | | 7 |
| No. of Other FTEs: 0.00 (2) | IT No | o, next year's impact: | \$0 | _ | | 0.00 (2 | 7 |
| No. of Other Files: 0.00 (2) | | | | No | | 0.00 (2 | <i>y</i> |
| | | | | | NO. OF OTHER FIES | . 0.00 (2 | 7 |
| | Fund Balanc | | | | | | |

In 2016, Parks & Recreation began capital projects to install a new multipurpose field at JL Sorenson Recreation Center in Herriman (PAR16JLRC01), and to replace the existing irrigation system at Tanner Park in Salt Lake City (PAR16TNPK03). Both projects were rebudgeted in 2017 to complete construction. When construction bids came in, the bids were under budget and the projects will have available budget once construction is complete for the current scope. Parks & Recreation requests scope changes to both projects to complete other improvements to grounds at the respective sites: \$90,000 for landscape improvements at JL Sorenson, and \$70,000 for pavilion replacement and ADA improvements at Tanner. The improvements at Tanner Park would use the same account code as the existing expenditure budget, so no adjustment is requested, only a scope change. No new funding is requested.

(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.

Mayor Financial Administration Page 2 of 2 Version 88 27//2017

Favoriles

Main Menu

Commitment Control

Review Budget Activities

Budget Details

Worklist

Performance Trace

Add to Favorites

Sign out

| Commitment | Control | Budget | Details |
|------------|---------|--------|---------|
|------------|---------|--------|---------|

| Business Unit | Ledger Group | Fund | Agency | Dept | Account | Bud Ref | Project | | Budget Period |
|---------------|----------------|-----------|---------------------|------------------|------------|---------|--------------------------|---------------|-------------------------------|
| SLC01 | SL_CAP_APP | 181 | 030 | 1070990000 | 000001 | 2017 | PAR16J | LRC01 | 2017 |
| Displa | y Chart 6 |) | | | | | | | |
| Leager Amou | ınts | | | | | | . , | | |
| Budget: | | | • | | 403,415.00 | USD | | <u></u> | Max 100 Rows Attributes |
| Expense: | | | | | 21,510.06 | USD | \$ | € tg | Parent / Children |
| Encumbrance | : | | | | 61,585.92 | USD | € > | 经 | Associated Budgets |
| Pre-Encumbra | nce: | | | | 0.00 | USD | © | <u>+₫</u> j | |
| | Associate R | levenue | · • - · · · · · · · | | 00 USD | | e december of the second | | Action Act |
| Available Bud | iget | | | | | | | | |
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| Budget Exce | ptions | | | | | | | | |
| | Exception Er | rors 0 | | Exception Warnin | gs 0 | | Budget Exc | eptions | |
| Return to S | search Previou | s in List | Next in L | ist Notify | | | | | |

Available as of 6/21/17 320,319.02

Pending June true-up (272,015.00)

Actual Available Budget 48,304.02

Encumbrance to be cancelled 49,998.44

98,302.46



| REQUEST FOR BUDGET ADJUSTMENT | | | | | | | |
|---|--------------|--------------------|--|----------------|---|----------|--------|
| | Executive | Summary | | <u></u> | | | |
| Reference No | : 554700YE0 | 2 | | For Fisc | al Year: | 2017 | ······ |
| Requesting Organization | : 55470000 | PARKS AND | REREATI | Date of F | Request: 2 | 21-Jun-1 | 17 |
| Budget Adjust Type(s | | | | Time Change | Y or N): | Υ | |
| | • | on Unit Shift | If N | o, next year's | impact: | | \$0 |
| | | | | Net FTE | Change: | 0.00 | |
| Description and Justi | | | | | | | |
| Parks & Recreation Bond I | • | | | - | | | |
| Proposition A (Parks & Re | • | | - | - | | | |
| new parks, trails, and recre 2017, the Council approve | | | | | | • | |
| by the Parks & Recreation | • . | • | | | • | - | |
| budget of \$31,000,000 and | • | | • | | , | • | |
| provide an update to the C | | | | | | | |
| alter the scope of certain s | | • | | - | | | |
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| | | | | | | | |
| | | Fund In | npact | | | | |
| SUMMARY OF FUND IMPACT BY | Y FUND | | | | | | |
| FUND: | 484 PARKS AN | D RECREATION | | | | | |
| | GO BOND FUN | D | | | | | |
| Fund Impact (Budgetary) | | \$0 | | | | | |
| Fund Impact (Transfers) | | \$0 | | | | | |
| TOTAL FUND IMPACT | | \$0 | | | | | |
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| SUMMARY OF CNTY FUNDING I | MPACI BY DEP | REVENUE | EXPENSE | BAL SHEET | CNTY FUNDING | _ | |
| TOTALS | | O | W. Philippe in Book Offices, recovered in the construction |) 0 | Transaction control of the control of the | <u></u> | |
| TOTALS | | | x 2000 2 | * I | | <u> </u> | * |
| | | Appro | vals | | | | |
| Division Director: | Mute | Leuse | <u></u> | Date: | | | |
| Dant or Floated Figure Man | 20 | (Z | | Date: h | 11 17 | | |
| Dept. or Elected Fiscal Mgr: | | <u> </u> | | Date: 6 | 21.17 | | |
| Dept. Dir. or Elected Official | Hally | M-ycer | | Date: | 21.17 | | |
| Facilities Division Director: | | U | | Date: | | | |
| (Capital Projects Only) | | -1 | ture and the second of the sec | | | | |
| | X | (1/ ₁ _ | | - 1 - | 21-17 | | |
| Chief Financial Officer: | | Approve | | Date: | · 17 | | |
| | 5, - | TILL IN | ماہ | 6 | 21 17 | | |
| Mayor or Designee: | THO | VITUR | VC_ | Date: | 1.12 | | |
| | / | Approve | | | | | |

Approve

Date:

Council Action:

| | | Budg | get Adjustme | nt Detail | | |
|-----------------|------------------------|-----------------------------|------------------------------|--|-----------------------------|--|
| get Year: | 2017 | | * Requesting D | epartment: 55470 | 0000 PARKS AND REREATK | ON GO BOND PROJE |
| get Period: P | ost June Year-End 🔹 | * Req Item No: | 554700YE02 - | * Adjustment Title: | Parks & Recreation Bond Pro | ject Adjustments |
| stment Type(s): | Existing Capital Proje | ct - | Appropriation Ur | nit Shift ▼ | | ▼ |
| Expense Budg | et String(s): | | | | | |
| FUND | AGENCY | SUB-DEPT ID | EXPENSE ACCOUNT | PROG/ACT ID (OPT) | PROJECT ID (CAP) | AMOUNT |
| 484 | 050 | 5547000000 | 607010 | , | PARB17CRRP | 22,343 |
| 484 | 050 | 5547000000 | 607015 | | PARB17CRRP | 49,157 |
| 484 | 050 | 5547000000 | 629025 | | PARB17CRRP | (60,000) |
| 484 | 050 | 5547000000 | 673020 | | PARB17CRRP | (11,500) |
| | | | | | | |
| | | | TOTAL F | PENDITURE CHANGE | • | \$0 |
| Revenue Budge | at Stringle): | | 10.72.2 | TENDIONE OFFICE | • | 30 |
| FUND | AGENCY | SUB-DEPT ID | REVENUE ACCOUNT | PROG/ACT ID (OPT) | PROJECT ID (CAP) | AMOUNT |
| 10,40 | ACEROI | 30D-DLF 1 ID | INCVENDE ACCOONT | TROOPED (OF I) | PROJECT ID (CAP) | AMOUNT |
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| | | | TOTAL | L OFVENUE QUANCE | | |
| | | | | AL REVENUE CHANGE | = | \$0 |
| Balance Sheet | String(s): F Bal sheet | t strings only required for | Proprietary Fund adjustments | ; check if applicable. | _ | |
| FUND | SUB-0 | DEPT ID | BAL. SHEE | T ACCOUNT | AMOU | NT |
| | | | BAL_SHT | | | |
| | | | BAL_SHT | | | |
| | | | BAL_SHT | NOT CHEST CHANCE | | |
| | | | IOIAL BALA | NCE SHEET CHANGE | : | \$0 |
| ∗∗ One Tim | ne Change (Y or N): | Υ | | No. of New FTEs: | 0.00 / | n. · |
| | next year's impact: | <u> </u> | No of No | w Time Limited FTEs: | 0.00 (| 2) |
| 11 140, | mext year a mipact. | | | of Transferred FTEs: | | 2) 2) |
| | | | 140 | No. of Other FTEs: | | 2) 2) |
| Fund Balance T | ransfers: | | | | | - / |
| From Fund | From Dept ID | To Fund | To Dept ID | Amount | 7 | |
| | | | , | |] | |
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| | | | <u> </u> | | _ | |
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| 1 | 1 1 | | | | | |

In November 2016, Salt Lake County residents voted to approve Proposition A (Parks & Recreation Bond), which authorized the county to issue general obligation bonds to build new parks, trails, and recreation amenities, as well as to renovate and improve existing facilities. On February 28, 2017, the Council approved a budget adjustment request to establish expenditure budgets for the projects funded by the Parks & Recreation Bond. The capital renewal and replacement project (PARB17CRRP) was set up with a budget of \$31,000,000 and divided into many sub-projects (using the Activity field). Parks & Recreation desires to provide an update to the Council to clarify the scope of certain sub-projects, shift budget among sub-projects, and after the scope of certain sub-projects. Please see attached worksheets. No additional funding is requested.



REQUEST FOR BUDGET ADJUSTMENT

| | | OK BOD | | | | | |
|---|---|--|---|---|---|---------------------------------|--|
| | Executive S | Summary | | | | | |
| Reference No | 5 : 554600YE01 | 1 | | For Fis | cal Year: | 2017 | |
| Requesting Organization | | | | | Request: | 21-Jun-1 | 7 |
| Budget Adjust Type(s) | | | ne Time Change | • | Υ | | |
| | Appropriation | | If No, next year's | - | | \$0 | |
| | | | | Net FTE | Change: | 0.00 | |
| Description and Justi | | | (D.) D. (O. D.) | | | | |
| Parleys Trail Adjustment: In 2013 Trail. The project has been rebud and most of the language used re require repair. Parks & Recreation with the end goal of delivering a c | geted in 2017 to con egarding Parley's Tra n requests a scope c | ntinue work on the ail centers on consi clarification that the | trail. The ent truction. How project will i | ire project budget has be rever, there are existing include repair and refurb | en in a capital parts of Parley' | expense acco s Trail that me | unt, rely |
| | | Fund In | npact | | | | |
| SUMMARY OF FUND IMPACT B | Y FUND | | | | | | |
| FUND: | 431 PARK BONI | D | | | | | |
| | PROJECTS FUND | 2 | | | | | |
| Fund Impact (Budgetary) | · | <u>so</u> | | | | | |
| Fund Impact (Transfers) | | 50 | | | | | |
| TOTAL FUND IMPACT | <u> </u> | 50 | | | | | |
| | | | | | | | |
| SUMMARY OF CNTY FUNDING I | | | F | <u> </u> | <u> </u> | | |
| DEPT | | REVENUE | EXPENSE | BAL SHEET | CNTY FUND | ING | |
| TOTALS | | 0 | <u> </u> | 0 0 |) | 0 | |
| | | | | | | | |
| | | Approv | /als | | | | |
| Division Director: | Martin | fler | | Date: | | | ******* <u>*</u> |
| Dept. or Elected Fiscal Mgr: | In Our | <u> </u> | | Date: 6 | 21.17 | | |
| Dept. Dir. or Elected Official | Hally | M. You | <u>n</u> | Date: | 21.17 | | ************************************** |
| Facilities Division Director: (Capital Projects Only) | | | | Date: | 0 / / / / / / / / / / / / / / / / / / / | | |
| Chief Financial Officer: | X MA | pprove ~= | | Date: | 21-15 | | |
| Mayor or Designee: | Chro | DITUAL | er - | Date: | 91.1 | 7 | |

Date:

Council Action:

| | | , 14 | phove | | | |
|------------------|------------------------------------|----------------|------------------------------|---------------------------------------|--------------------------|----------------------|
| | | Budg | get Adjustmer | nt Detail | | |
| et Year: | 2017 | | * Requesting Do | epartment: 55460 | 000 PARLEYS TRAIL - PARK | ANALOGO V VITTAT AIA |
| et Period: Pos | t June Year-End ▼ | * Req Item No: | _ | ≉ Adjustment T | | |
| tment Type(s): | Existing Capital Project | | Appropriation Unit Shift | | | |
| Expense Budget | String(s): | | | | | |
| FUND | AGENCY | SUB-DEPT ID | EXPENSE ACCOUNT | PROG/ACT ID (OPT) | PROJECT ID (CAP) | AMOUNT |
| 431 | -030 D50 V | | 673020 | | BND13_PARLEYS | (24,00 |
| 431 | 930-050 V | 5546000000 | 607010 | | BND13_PARLEYS | 24,000 |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | TOTAL EX | PENDITURE CHANGE: | | \$0 |
| Revenue Budget | Stri(a). | | | | | |
| | | CUD DEDT ID | DEVENUE ACCOUNT | PROCUCTIN (ORT) | DDO (ECT ID (CAR) | AMOUNT |
| FUND | AGENCY | SUB-DEPT ID | REVENUE ACCOUNT | PROG/ACT ID (OPT) | PROJECT ID (CAP) | AMOUNT |
| | | | | 1.1/ | | |
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| | | | TOTA | L REVENUE CHANGE: | | \$0 |
| Balance Sheet St | tring(s): = p-1-t | | Proprietary Fund adjustments | , strong if confineble | | |
| FUND | SUB-DE | | BAL. SHEE | | AMOU | NT |
| FOND | | | BAL_SHT | | 7 | |
| | | | BAL_SHT | | | |
| | | | BAL_SHT | | | |
| | | | TOTAL BALA | NCE SHEET CHANGE | <u> </u> | \$0 |
| | OL O/ N). | V | | No. of No STEA. | 0.00 | n) |
| | Change (Y or N):ext year's impact: | Y \$0 | | No. of New FTEs: w Time Limited FTEs: | 0.00 (2 | <i>2)</i> Di |
| ii NO, iii | ext year s impact. | ΨΟ | | of Transferred FTEs: | 0.00 (2 | -/ ?) |
| | | | | No. of Other FTEs: | 0.00 (2 | -/ 2) |
| Fund Balance Tra | ansfers: | | | | , | , |
| From Fund | From Dept ID | To Fund | To Dept ID | Amount | 1 | |
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Description and justification: (Attach additional pages as needed.)*

In 2013, Parks & Recreation began a project (BND13_PARLEYS) to design and construct trail segments of Parley's Trail. The project has been rebudgeted in 2017 to continue work on the trail. The entire project budget has been in a capital expense account, and most of the language used regarding Parley's Trail centers on construction. However, there are existing parts of Parley's Trail that merely require repair. Parks & Recreation requests a scope clarification that the project will include repair and refurbishing existing parts of the trail, with the end goal of delivering a comprehensive and consistent trail system. No new funding is requested.

(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.

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