

15.2

REQUEST FOR BUDGET ADJUSTMENT

Executive Summary

Reference No: 701000YE01	For Fiscal Year: 2017
Requesting Organization: 70100000 COUNCIL	Date of Request: 1-Aug-17
Budget Adjust Type(s): Appropriation Unit Shift	One Time Change (Y or N): Y
	If No, next year's impact: \$0
	Net FTE Change: 0.00
Description and Justification:	
Copier Purchase: Transfer funds from operations to capital for the purchase of a new copier.	

Fund Impact

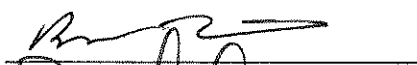
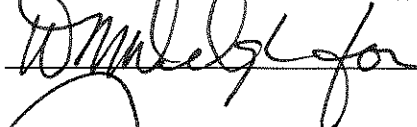
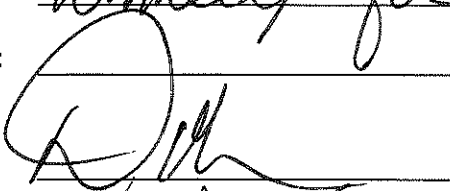


SUMMARY OF FUND IMPACT BY FUND

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: 8/2/17
Dept. Dir. or Elected Official:		Date: 8/2/17
Facilities Division Director: (Capital Projects Only)		Date: _____
Chief Financial Officer:		Date: 8/3/17
Mayor or Designee:	 Approve	Date: 8/4/17
Council Action:	_____ Approve	Date: _____

Budget Adjustment Detail

REQUEST FOR BUDGET ADJUSTMENT

15.3

Executive Summary

Reference No: 526300_01 For Fiscal Year: 2017
 Requesting Organization: 10220000 MAYOR FINANCIAL A Date of Request: 3-Aug-17
 Budget Adjust Type(s): Technical One Time Change (Y or N): Y
 If No, next year's impact: \$0
 Net FTE Change: 0.00

Description and Justification:

TRCC Bond True-Up and Closing Fund 481 : TRCC funds of \$500,000 were transferred in 2016 per budget adjustment dated December 6th, 2016, which delayed the bond issuance to 2017, now the bond is issued and bond proceeds should be transferred back to TRCC Fund. The fund 481 encumbrances are deleted and funds of \$42,406 are appropriating to fund 483, department 5263000000.

Fund Impact

SUMMARY OF FUND IMPACT BY FUND

FUND:	181 TRCC TOURISM REC CULTRL CONVEN FUND	481 PARKS AND PW OP CENTER FUND	483 TRCC BOND PROJECTS FUND
Fund Impact (Budgetary)	\$0	\$0	(\$41,792)
Fund Impact (Transfers)	\$500,000	(\$347,173)	(\$152,827)
TOTAL FUND IMPACT	\$500,000	(\$347,173)	(\$194,619)

SUMMARY OF CNTY FUNDING IMPACT BY DEPT

DEPT	REVENUE	EXPENSE	BAL SHEET	CNTY FUNDING
5263000000 PARKS OPERATIONS CENTER PRGM	67,762	110,021	0	42,259
5264000000 TRCC RELATED CAP MAINT PROJECTS	21,651	21,604	0	(47)
5265000000 MID-VALLEY REGIONAL CULTURAL CENTER PRGM	193,900	193,480	0	(420)
TOTALS	283,313	325,105	0	41,792

Division Director: _____

Date: _____

Dept. or Elected Fiscal Mgr: _____

Date: 8/3/17

Dept. Dir. or Elected Official: _____

Date: _____

Facilities Division Director:
(Capital Projects Only)

Date: _____

Chief Financial Officer: _____

Date: 8/3/17

Mayor or Designee: _____

Date: 8/3/17

Council Action: _____

Date: _____

Approve

Budget Adjustment Detail

Budget Year: 2017 *** Requesting Department:** 10220000 MAYOR FINANCIAL ADMINISTRATION
Budget Period: Post June Year-End *** Req Item No:** 526300_01 *** Adjustment Title:** TRCC Bond True-Up and Closing Fund 481
Adjustment Type(s): Technical

Expense Budget String(s):

FUND	AGENCY	SUB-DEPT ID	EXPENSE ACCOUNT	PROG/ACT ID (OPT)	PROJECT ID (CAP)	AMOUNT
483	050	5263000000	639025	PAR01	CAP15_PRKOPSLD	67,615
483	050	5264000000	639025	SLC01	SANDYPERFARTCTR	21,604
483	050	5265000000	639025	CFA01	CFA_001MV	193,480
483	050	5263000000	677005	PAR01	CAP15_PRKOPSLD	42,406
TOTAL EXPENDITURE CHANGE:						\$325,105

Revenue Budget String(s):

FUND	AGENCY	SUB-DEPT ID	REVENUE ACCOUNT	PROG/ACT ID (OPT)	PROJECT ID (CAP)	AMOUNT
483	050	5263000000	710100	PAR01	CAP15_PRKOPSLD	(2,002,059)
483	050	5264000000	710100	SLC01	SANDYPERFARTCTR	(639,703)
483	050	5265000000	710100	CFA01	CAP15_PRKOPSLD	(5,728,895)
483	050	5263000000	710110	PAR01	CAP15_PRKOPSLD	2,069,821
483	050	5264000000	710110	SLC01	SANDYPERFARTCTR	661,354
483	050	5265000000	710110	CFA01	CAP15_PRKOPSLD	5,922,795
TOTAL REVENUE CHANGE:						\$283,313

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):** y
If No, next year's impact: _____
No. of New FTEs: 0.00 (2)
No. of New Time Limited FTEs: 0.00 (2)
No. of Transferred FTEs: 0.00 (2)
No. of Other FTEs: 0.00 (2)

Fund Balance Transfers:

From Fund	From Dept ID	To Fund	To Dept ID	Amount
481	5263000000	483	5263000000	347,173
483	5263000000	181	1070000000	500,000

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

TRCC funds of \$500,000 were transferred in 2016 per budget adjustment dated December 6th, 2016, which delayed the bond issuance to 2017, now the bond is issued and bond proceeds should be transferred back to TRCC Fund. The fund 481 encumbrances are deleted and funds of \$42,406 are appropriating to fund 483, department 5263000000.

(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.



To: Members of the Salt Lake County, UT Distribution List
From: Jon Bronson, Sr. Vice President/Managing Director
Date: Wednesday, July 05, 2017

Closing

Date: Tuesday, July 11, 2017
Time: 9:00 A.M. (MDT)
Location: Chapman & Cutler LLP
215 South State Street, Suite 800
Salt Lake City, UT 84111
T | 801.536.0066 F | 801.533.9595

Underwriter

Wells Fargo Securities
Bob Kinney
299 S Main Street, 6th Floor
Salt Lake City UT 84111
T | 385.415.8200 F | 347.712.2482
bob.kinney@wellsfargo.com

Trustee, Bond Registrar and Paying Agent

Zions Bank a division of ZB National Association
David Van Wagoner and Verena Critser
One South Main Street, 12th Floor
Salt Lake City, UT 84133
T | 801.844.7516 T | 801.844.8517
david.vanwagoner@zionsbankcorp.com
verena.critser@zionsbank.com

Bonds Purchased and to be Delivered

Par Amount.....	\$44,230,000
Dated Date.....	July 11, 2017
Interest Payment Dates.....	February 1 and August 1
First Interest Payment.....	February 1, 2018
Call Feature	The 2017 TRCC Bonds maturing on or after February 1, 2028 are callable in whole or in part at par on or after February 1, 2027

Maturity Schedule

Due February 1	Principal Amount	Coupon	Yield	CUSIP (79560Q)
2018	\$1,235,000	5.00%	0.82%	CJ5
2019	1,430,000	5.00	0.95	CK2
2020	1,500,000	5.00	1.07	CL0
2021	1,555,000	2.00	1.15	CM8
2022	1,610,000	5.00	1.25	CN6
2023	1,695,000	5.00	1.39	CP1
2024	1,780,000	5.00	1.51	CQ9
2025	1,870,000	5.00	1.62	CR7
2026	1,970,000	5.00	1.79	CS5
2027	2,070,000	5.00	1.94	CT3
2028	2,175,000	5.00	2.11	CU0
2029	2,285,000	5.00	2.21	CV8
2030	2,405,000	5.00	2.29	CW6
2031	2,525,000	5.00	2.39	CX4
2032	2,655,000	5.00	2.45	CY2
2033	2,795,000	5.00	2.52	CZ9
2034	2,935,000	5.00	2.58	DA3
2035	3,085,000	5.00	2.63	DB1
2036	3,245,000	5.00	2.67	DC9
2037	3,410,000	5.00	2.70	DD7
Total	\$44,230,000			

Registration and Delivery Under The Book-Entry System

The Bonds are being issued as fully registered Book-Entry Certificates. Chapman and Cutler LLP, Bond Counsel to the County, has prepared the Certificates, one for each maturity in the registered name of Cede & Co. Certain legal matters will be passed on for the County by Ralph Chamness, Chief Deputy District Attorney.

The Bonds are scheduled to close with DTC using the FAST method. Bond Counsel will deliver the Bond Certificates to the County. Once signed, the County will deliver the Certificates to the Paying Agent/Bond Registrar. The Paying Agent/Bond Registrar will hold the Certificates as FAST Agent.

Calculation of Total Settlement Amount

Par Amount.....	\$44,230,000.00
Plus: Net Reoffering Premium.....	8,653,969.65
Less: Underwriter's Discount	<u>(95,699.00)</u>
Total Settlement Amount.....	<u>\$52,788,270.65</u>

Sources and Uses of Funds

Par Amounts of Bonds.....	\$44,230,000.00
Reoffering Premium	<u>8,653,969.65</u>
Total Sources	<u>\$52,883,969.65</u>

Uses of Funds

Deposit to Project Construction Fund	\$52,600,700.00
Costs of Issuance	187,000.00
Total Underwriter's Discount (0.216%)	95,699.00
Rounding Amount	<u>570.65</u>
Total Uses.....	<u>\$52,883,969.65</u>

Federal Funds Wire Instructions

On the date of closing Wells Fargo Securities will initiate a federal funds wire transfer in the
Total Settlement Amount of \$52,788,270.65 to:

ZB, N.A. DBA Zions Bank
ABA No.: 124000054
Account number: 080-00043-3
Attn.: David Van Wagoner and Verena Critser
Salt Lake County, Utah
Sales Tax Revenue (TRCC) Bonds, Series 2017

We will verify receipt of the settlement amount by calling David Van Wagoner or Verena Critser Escrow Agent/Paying Agents at phone numbers (801) 844-7516 and (801) 844-8571.

Closing and Delivery of Bonds

As soon as funds are credited and received, Chapman and Cutler LLP will certify that all conditions of closing have been satisfied. The County, the Underwriter, the Paying Agent/Bond Registrar and Bond Counsel will then place a call to the Depository Trust Company authorizing the bonds to be released for delivery. The Closing Coordinator for Wells Fargo Securities is Bob Kinney. His telephone number is (385) 415-8200. The call to The Depository Trust Company must be completed by 11:00 a.m. (MDT); the telephone number for DTC is (212) 855-3752.

Costs of Issuance

On or soon after the Closing date, the County will be responsible to pay all costs of issuance associated with this bond issue. These costs have been estimated at \$187,000.00. All billings should be presented directly to the Municipal Advisor to the County at or before the closing. After review and approval by the County, the Paying Agent/Bond Registrar will be directed to pay these bills out of bond proceeds.

If you have any questions or comments concerning this information, please feel free to call me. It has been a pleasure working with all of you and we look forward to our future association. Thank you.



COUNTY COUNCIL

Max Burdick, Chair
District #6

Jenny Wilson
At-Large A

Richard Snelgrove
At-Large B

Jim Bradley
At-Large C

Arlyn Bradshaw
District #1

Michael Jensen
District #2

**Aimee Winder-Newton,
Chair**
District #3

Sam Granato
District #4

Steven L. DeBry
District #5

December 6, 2016

Mr. Darrin Casper
Chief Financial Officer, Mayor's Office
Rm. N4-200, Government Center
Salt Lake City, Utah

Dear Mr. Casper:

The Salt Lake County Council, at its meeting held this day, approved your request for an interim budget adjustment of \$500,000 to issue TRCC Bonds in 2017 instead of 2016. This will entail transferring funds from the TRCC Fund to the Parks and Public Works Operations Project to keep that fund balance positive at year-end. Then, the TRCC Fund will be reimbursed after the issuance of the bonds.

Pursuant to the above action, you are hereby authorized to effect the same.

Respectfully yours,

SALT LAKE COUNTY COUNCIL

SHERRIE SWENSEN, COUNTY CLERK

By 
Deputy Clerk

ks

pc: Rod Kitchens/Mayor's Office
Gabe Anguiano/Mayor's Office
Heather Whatcott/Mayor's Office
David Delquadro/Council Office
Brad Kendrick/Council Office

REQUEST FOR INTERIM/JUNE/YEAR-END BUDGET ADJUSTMENT

15.12

Executive Summary

Reference No: 102200YE02	For Fiscal Year: 2016
Requesting Organization: 10220000 MAYOR FINANCIAL A	Date of Request: 22-Nov-16
Budget Adjust Type(s): Technical	One Time Change (Y or N): Y
	If No, next year's impact: \$0
	Net FTE Change: 0.00

Description and Justification:

TRCC Bonds Issuance in 2017 instead of 2016: TRCC Bonds were originally planned to be issued in December 2016, now will be issued in early 2017 instead. This transfer will allow for the later bond issuance and keep the fund balance positive at year-end. The funds will be reimbursed to TRCC fund after issuance of the bonds.

Fund Impact

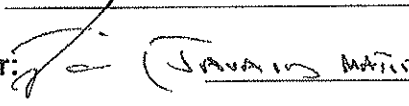
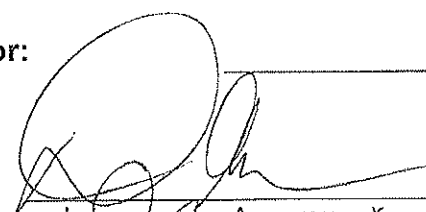
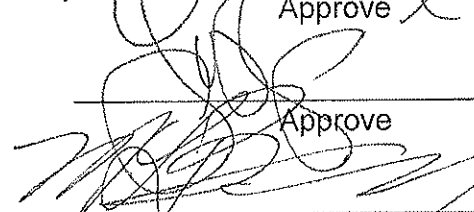
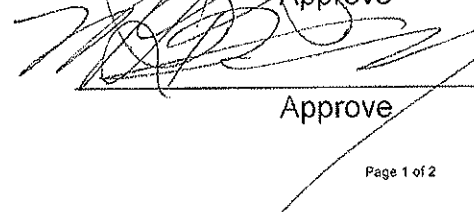
SUMMARY OF FUND IMPACT BY FUND

FUND:	181 TRCC TOURISM REC CULTRL CONVEN FUND	481 PARKS AND PW OP CENTER FUND
Fund Impact (Budgetary)	\$0	\$0
Fund Impact (Transfers)	(\$500,000)	\$500,000
TOTAL FUND IMPACT	(\$500,000)	\$500,000

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: 11/22/16
Dept. Dir. or Elected Official: _____	Date: _____
Facilities Division Director: _____ (Capital Projects Only)	Date: _____
Chief Financial Officer:  _____	Date: 11-22-16
Mayor or Designee:  _____	Date: 11/28/16
Council Action:  _____	Date: 12/6/16

Budget Adjustment Detail

Budget Year: 2016 * Requesting Department: 10220000 MAYOR FINANCIAL ADMINISTRATION
 Budget Period: Year-End * Req Item No: 102200YE02 * Adjustment Title: TRCC Bonds Issuance in 2017 instead of 2016
 Adjustment Type(s): Technical

Expense Budget String(s):

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

TOTAL EXPENDITURE CHANGE: \$0

Revenue Budget String(s):

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

TOTAL REVENUE CHANGE: \$0

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

FUND	SUB-DEPT ID	BAL. SHEET ACCOUNT	AMOUNT

TOTAL BALANCE SHEET CHANGE: \$0

* One Time Change (Y or N): Y
 If No, next year's impact:
 No. of New FTEs: 0.00 (2)
 No. of New Time Limited FTEs: 0.00 (2)
 No. of Transferred FTEs: 0.00 (2)
 No. of Other FTEs: 0.00 (2)

Fund Balance Transfers:

From Fund	From Dept ID	To Fund	To Dept ID	Amount
181	1070000000	481	5263000000	500,000

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

TRCC Bonds were originally planned to be issued in December 2016, now will be issued in early 2017 instead. This transfer will allow for the later bond issuance and keep the fund balance positive at year-end. The funds will be reimbursed to TRCC fund after issuance of the bonds.

(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.

Javaid I. Majid

From: John Bergen
Sent: Tuesday, November 22, 2016 11:59 AM
To: Melani Martinez
Cc: Lori Okino; Greg Foltz; Javaid I. Majid; Darrin Casper; Brent Laulusa; Meridee Syme; Antigone Carlson
Subject: Re: FW: Parks & Recreation Bond

All,

Discussion today regarding the final expenses for 2016 and the Parks & Public Works Operations project, has revealed one new expected encumbrance for the building permit, as a estimated \$250k fee which would be due early to mid December to West Jordan City. The PDT is meeting with the city on December 1st to receive the actual cost. I've asked for it in advance but the city process does not calculate the fee until all outstanding items are finalised associated with the permit.

Hope this helps better define the year- end expenses.

Thanks,
John

Sent from my Verizon 4G LTE Droid

On Nov 21, 2016 4:44 PM, Melani Martinez <MMartinez@slco.org> wrote:

John,

Please find attached an encumbrance report showing \$211,234.87 in outstanding encumbrances for Parks & Recreation against the bond. We need to know immediately if these encumbrances will be deleted by year's end or if they are valid and will remain.

Could you please let us know right away what the status of this is?

Thank you,

Melani Martinez

Fiscal Coordinator

Mayor's Financial Administration

2001 S State St., #N4-200

Salt Lake City, UT 84114

385-468-7077

mmartinez@slco.org



From: Melani Martinez

Sent: Thursday, November 17, 2016 8:47 AM

To: Meridee Syme <MSyme@slco.org>

Cc: Darrin Casper <DCasper@slco.org>; Greg Folta <GFolta@slco.org>; Lori Okino <LOkino@slco.org>; Brent Laulusa <BLaulusa@slco.org>; Antigone Carlson <ACarlson@slco.org>; Javaid I. Majid

<JMajid@slco.org>

Subject: Parks & Recreation Bond

Meridee,

This is in regards to requisition # 31878 for a bid for \$12,000,000.00. We understand that this will be deleted once the vendor has been selected but we wanted to make sure that you and your office is aware that no actual purchases can be made against this bond funded project until 2017. In addition, this fund 481 is going to be closed in 2017 and the project with the same department ID has been moved to fund 483.

Will you please let anyone else that may be entering requisitions/purchase orders against this know to wait until 2017 to complete them? It is imperative that no money get spent against this bond before that.

Please let me know if you have any questions or concerns.

Thanks,

Melani Martinez

Fiscal Coordinator

Mayor's Financial Administration

2001 S State St., #N4-200

Salt Lake City, UT 84114

385-468-7077

mmartinez@slco.org



Run Date: 11/15/2016
Report ID: PB630

Salt Lake County
All Open Encumbrances
Department Rollup
As of: 10/31/2016

Page 182 of 208

PO ID	PO Date	PO Status	Bud Ref	Program	PC Bus Unit	Fund Source	Project	Activity/ PO Amt	Supplier/ Voucher Amt	Dept-ID/ Outstanding
Fund: 481										
Organization: 5263000000 Parks & PW Operations Center										
Account: 677005 481-050-5263000000-677005										
0000026198	4/18/2016	Dispatched	2016		PAR01	30000	CAP15_PRKO PSBLD	PL_COMM	WELSH COMMISSIONING GROUP INC	5263000000
	Park & Public Works Center-Design & Construction - J. Bergen							44,795.00	2,520.00	42,275.00
0000029129	8/9/2016	Dispatched	2016		PAR01	30000	CAP15_PRKO PSBLD	PL_COMM	WELSH COMMISSIONING GROUP INC	5263000000
	Parks & Public Works Design/Const. - Amend \$6500.							6,880.00	0.00	6,880.00
0000031206	10/28/2016	Dispatched	2016		PAR01	30000	CAP15_PRKO PSBLD	PL_DESIGN	WELSH COMMISSIONING GROUP INC	5263000000
	park & pw building review construction designs							2,779.50	0.00	2,779.50
0000031209	10/28/2016	Dispatched	2016		PAR01	30000	CAP15_PRKO PSBLD	PL_DESIGN	BLALOCK & PARTNERS LLC	5263000000
	park operations design development							145,733.89	0.00	145,733.89
0000031210	10/28/2016	Dispatched	2016		PAR01	30000	CAP15_PRKO PSBLD	PL_DESIGN	BLALOCK & PARTNERS LLC	5263000000
	parks & public works building design							13,566.48	0.00	13,566.48

Summary for Account 677005

213,754.87	2,520.00	211,234.87
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Summary for Rollup Dept 5263000000

213,754.87	2,520.00	211,234.87
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Summary for Fund 481

213,754.87	2,520.00	211,234.87
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15.4

REQUEST FOR BUDGET ADJUSTMENT

Executive Summary

Reference No: 760000YE01	For Fiscal Year: 2017
Requesting Organization: 76000000 AUDITOR	Date of Request: 3-Aug-17
Budget Adjust Type(s): FTE/Position Reclass	One Time Change (Y or N): Y
	If No, next year's impact: \$0
	Net FTE Change: 0.00
Description and Justification:	
Auditor FTE Reclassification: See attached CPDQ	

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: 8/3/2017

Dept. Dir. or Elected Official:

Date: 8/3/2017

Facilities Division Director:
(Capital Projects Only)

Date: _____

Chief Financial Officer:

Date: _____

Mayor or Designee:

Approve
Kimberly [Signature]
Approve

Date: 8/4/17

Council Action:

Approve

Date: _____

Budget Adjustment Detail

Budget Year: 2017 * Requesting Department: 76000000 AUDITOR
 Budget Period: Post June Year-End * Req Item No: 760000YE01 * Adjustment Title: Auditor FTE Reclassification
 Adjustment Type(s): FTE/Position Reclass

Expense Budget String(s): *This adjustment involves a reclass; while the next year's financial impact may be presented, no actual budget adjustment is required*

FUND	AGENCY	SUB-DEPT ID	EXPENSE ACCOUNT	PROG/ACT ID (OPT)	PROJECT ID (CAP)	AMOUNT
110	076	7600000100				0
TOTAL EXPENDITURE CHANGE:						\$0

Revenue Budget String(s):

FUND	AGENCY	SUB-DEPT ID	REVENUE ACCOUNT	PROG/ACT ID (OPT)	PROJECT ID (CAP)	AMOUNT
TOTAL REVENUE CHANGE:						\$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

* One Time Change (Y or N): Y
If No, next year's impact: _____

No. of New FTEs: 0.00 (2)
 No. of New Time Limited FTEs: 0.00 (2)
 No. of Transferred FTEs: 0.00 (2)
 No. of Other 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.)*

See attached CPDQ

(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.

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)	249
Existing/Proposed Job Start Date	Existing/July 1, 2017
Existing/Proposed Job Code	564 to 300
Existing/Proposed Job Title	Audit Manager to Sr. Internal Auditor
Position Type: Full-Time (FT), Part-Time (PT)	FT
Time Limited? Yes / No	N
If Time Limited, expected expiration date	
Location Code (four digit number)	1014
Fund	To: 110 From: 110
PS/BRASS Sub Department Id	To: 7600000100 From: 7600000100
Reports To Position Number	252
Reports To Job Title	Audit Manager
FTE (Example: .50 / .75 / 1.0)	To: 0 From: 0
Action Type: (New position (N), New TL (TL), Reclassification (R), Transfer (T), FTE Change/Re-Allocation (RA), Abolish (A), Other (O))	R

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 TL (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	
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), Transfer (T), FTE Change/Re-Allocation (RA), Abolish (A), Other (O))	

Total No. of New FTEs:	0
Total No. of New Time Limited FTEs:	0
Total No. of Transferred FTEs:	0
Total No. of Other Actions:	0

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

Council Approval section below to be completed only by Council Staff and to be submitted to HR for final processing.

Council Approved	Yes	No	Date	Signature
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Action Type List:

N New
 TL New Time Limited
 R Reclass
 T Transfer
 A Abolish
 RA Re-allocate
 O Other

Reclass Flag

CONDENSED POSITION DESCRIPTION QUESTIONNAIRE (CPDQ)

CLASSIFICATION REQUEST

Please complete this form, review with department/division personnel, obtain any necessary approvals as outlined in the Council and HR Requirements Matrix, and forward to your HR consultant. In addition, please include your division's most recent Organization Chart.

This request is for a: Vacant to Existing Position

Department Name: Auditor

Position Number: 00000249

Division Name: Audit Services

Division Number: 7600000000

Information Regarding Vacant Existing Allocation

Current Job Title/Grade: Internal Auditor/15

Job Code: 300

New Existing Title/Grade: Sr Internal Auditor/16

Agency Budget Impact:

- ☒ 1) There is no budget increase to this year or subsequent year's budgets resulting from this position classification change. Please provide an explanation below:

See the Business Justification below.

As part of this request, the employee's salary will be reduced by 5% as they will no longer be serving in a supervisory capacity.

- ☐ 2) There is an increase to this year or subsequent year's budgets. Below is a summary of the budget impact:

- ☐ 3) The budget impact for this classification change is unknown at this time.

Business Justification: Please provide a brief summary of the organization need or business justification for this position classification request.

This reclassification is due to an employee's request for reassignment and change of job title. They asked to relinquish the position of Audit Manager/17 and return to their previous position of Senior Internal Auditor/16. The division currently has a vacancy for an Internal Auditor/15. This reclassification will allow management the ability to grant the employee's request and provide consistent, able leadership for the division moving forward.

Department/Division Approval Signatures

By providing approval and electronically signing below, this certifies that processing this classification action does not have a negative impact on the current year's personnel budget. Any budgetary impact has already been addressed and approved by the Council, as needed.

Elected Official or Department Director	Approved: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Signature: Scott Tingley	Digitally signed by Scott Tingley Date: 2017.07.27 09:59:12 -06'00'
Division Director/ Administrator	Approved: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Signature: <i>[Signature]</i>	7/27/17
Immediate Supervisor	Approved: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Signature: <i>[Signature]</i>	7/27/17
Immediate Supervisor's Title: Chief Deputy Auditor			
E-Mail: cajohnson@slco.org		Phone Number: 385-468-7174	

HR Consultant Contact Information

Consultant	E-Mail	Phone
Debbie Wine	dwine@slco.org	(385) 468-0574
Tracy Byington	tbyington@slco.org	(385) 468-0588
Martinha Penrod	mpenrod@slco.org	(385) 468-0592
Terry Fortner	tfortner@slco.org	(385) 468-0591

15.5

REQUEST FOR BUDGET ADJUSTMENT

Executive Summary

Reference No: 225000YE01	For Fiscal Year: 2017
Requesting Organization: 22500000 BEHAVIORAL HEALTH	Date of Request: 2-Aug-17
Budget Adjust Type(s): New Revenue and Expenditure Technical	One Time Change (Y or N): N
	If No, next year's impact: \$2,487,817
	Net FTE Change: 3.00

Description and Justification:

New State JRI and Fed STR funding: This request is to recognize 6-month of the new state JRI (SFY18 \$1,987,817, a total of \$3,975,634 for two state fiscal years) and one year federal Opioid STR grant funding (\$500K). This request is also to move Salt Lake City's contribution \$150K to the Operation Diversion Program from Stat & Gen to BHS.

1. State JRI funds are to fund:

\$1.4M to expansion of the Intensive Supervision Program (ISP)

* Treatment dollars to the provider network \$965K

* CJS fulfills two unfunded case manager positions \$172K

* Sheriff adds three Officers in CJS for this program \$265K

\$500K to expand Adult Drug Court treatment;

\$85K to fund a pilot program, coupling an MCOT MH worker with a UPD officer to more effectively resolve mental health crisis needs UPD officers are encountering

2. Federal Opioid STR \$500K to expand Medication Assisted Treatment (MAT) in the West Jordan area.

3. Move \$150K (Salt Lake City's contribution to the Operation Diversion Project) from Stat & Gen to BHS be utilized to fund ongoing Operation Diversion residential and detox beds at VOA..

BHS will be the recipient of the funds and will fund CJS and Sheriff via Interfund transactions.

Fund Impact

SUMMARY OF FUND IMPACT BY FUND

FUND:	110 GENERAL FUND	120 GRANT PROGRAMS FUND
Fund Impact (Budgetary)	\$0	\$0
Fund Impact (Transfers)	\$0	\$0
TOTAL FUND IMPACT	\$0	\$0

SUMMARY OF CNTY FUNDING IMPACT BY DEPT

DEPT	REVENUE	EXPENSE	BAL SHEET	CNTY FUNDING
2250000100 MENTAL HEALTH TREATMENT	42,500	42,500	0	0
2250000200 SUBSTANCE USE DISORDER TREATMT	1,351,409	1,351,409	0	0
2400000101 CRIMINAL JUSTICE ADMIN	0	(31,600)	0	(31,600)
2400000301 PROBATION CASE MANAGEMENT	0	31,600	0	31,600
5003002500 OPERATION DIVERSION	(150,000)	(150,000)	0	0
9120001100 JAIL SECURITY	132,497	169,497	0	37,000
9120001200 JAIL SUPPORT-JAIL	0	(37,000)	0	(37,000)
TOTALS	1,376,406	1,376,406	0	0

Approvals

Division Director:	Tim Whalen	<small>Digitally signed by Tim Whalen Date: 2017.08.02 12:07:48 -06'00'</small>	Date: _____
Dept. or Elected Fiscal Mgr:	Yanping Ding	<small>Digitally signed by Yanping Ding Date: 2017.08.02 12:10:26 -06'00'</small>	Date: _____
Dept. Dir. or Elected Official:	Karen Crompton	<small>Digitally signed by Karen Crompton Date: 2017.08.02 12:19:36 -06'00'</small>	Date: _____
Facilities Division Director:	_____		Date: _____
(Capital Projects Only)	_____		Date: _____
Chief Financial Officer:		Approve	Date: 8/31/17
Mayor or Designee:	_____	Approve	Date: _____
Council Action:	_____	Approve	Date: _____

Budget Adjustment Detail

Budget Year: 2017 *** Requesting Department:** 22500000 BEHAVIORAL HEALTH SERVICES PRGM
Budget Period: Post June Year-End *** Req Item No:** 225000YE01 *** Adjustment Title:** New State JRI and Fed STR funding
Adjustment Type(s): New Revenue and Expenditure Technical

Expense Budget String(s):

FUND	AGENCY	SUB-DEPT ID	EXPENSE ACCOUNT	PROG/ACT ID (OPT)	PROJECT ID (CAP)	AMOUNT
120	020	2250000200	665110 SUD AND MH SUBCONTRACTOR PMTS			982,801
120	020	2250000200	693020 INTERFUND CHARGES			218,608
120	020	2250000100	665110 SUD AND MH SUBCONTRACTOR PMTS			42,500
120	020	2250000200	665110 SUD AND MH SUBCONTRACTOR PMTS			150,000
110	050	5003002500	639025 OTHER PROFESSIONAL FEES			(150,000)
110	020	2400000101	633010 RENT - BUILDINGS			(20,000)
110	020	2400000101	615035 SMALL EQUIPMENT (NON-COMPUTER)			(11,600)
110	020	2400000301	633010 RENT - BUILDINGS			20,000
110	020	2400000301	615035 SMALL EQUIPMENT (NON-COMPUTER)			11,600
110	091	9120001100	601035 PERM AND PROV-PUBLIC SAFETY	GV01		52,597
TOTAL EXPENDITURE CHANGE:						1,296,506
TOTAL EXPENDITURE CHANGES (ALL TABS)						\$1,376,406

Revenue Budget String(s):

FUND	AGENCY	SUB-DEPT ID	REVENUE ACCOUNT	PROG/ACT ID (OPT)	PROJECT ID (CAP)	AMOUNT
120	020	2250000200	411000 STATE GOVERNMENT GRANTS			951,409
120	020	2250000200	415000 FEDERAL GOVERNMENT GRANTS			250,000
120	020	2250000100	411000 STATE GOVERNMENT GRANTS			42,500
120	020	2250000200	423000 LOCAL GOVERNMENT GRANTS			150,000
110	050	5003002500	417005 OPRTG CONTRIBUTIONS-RESTRICTED			(150,000)
110	020	2400000301	431160 INTERFUND REVENUE			172,016
110	020	2400000301	421125 CLIENT FEES			(172,016)
110	091	9120001100	431160 INTERFUND REVENUE	GV021		132,497
TOTAL REVENUE CHANGE:						1,376,406

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

* One Time Change (Y or N): N
 If No, next year's impact: \$2,487,817

No. of New FTEs: 3.00 (2)
 No. of New Time Limited FTEs: 0.00 (2)
 No. of Transferred FTEs: 0.00 (2)
 No. of Other 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.)*

This request is to recognize 6-month of the new state JRI (SFY18 \$1,987,817, a total of \$3,975,634 for two state fiscal years) and one year federal Opioid STR grant funding (\$500K). This request is also to move Salt Lake City's contribution \$150K to the Operation Diversion Program from Stat & Gen to BHS.

1. State JRI funds are to fund:

- \$1.4M to expansion of the Intensive Supervision Program (ISP)
 - * Treatment dollars to the provider network \$965K
 - * CJS fulfills two unfunded case manager positions \$172K
 - * Sheriff adds three Officers in CJS for this program \$265K

\$500K to expand Adult Drug Court treatment;

\$85K to fund a pilot program, coupling an MCOT MH worker with a UPD officer to more effectively resolve mental health crisis needs UPD officers are encountering

2. Federal Opioid STR \$500K to expand Medication Assisted Treatment (MAT) in the West Jordan area.

3. Move \$150K (Salt Lake City's contribution to the Operation Diversion Project) from Stat & Gen to BHS be utilized to fund ongoing Operation Diversion residential and detox beds at VOA..

BHS will be the recipient of the funds and will fund CJS and Sheriff via Interfund transactions.

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

Expense Budget String(s):

[illegible]

\$79,900

Revenue Budget String(s):

[illegible]

\$0

15.6

Executive Summary			
Reference No:	351000-07	For Fiscal Year:	2017
Requesting Organization:	35100000 CLARK PLANETARIUM	Date of Request:	3-Aug-17
Budget Adjust Type(s):	FTE/Position Reclass	One Time Change (Y or N):	N
		If No, next year's impact:	\$8,787
		Net FTE Change:	1.00
Description and Justification:			
<p>Education Program Supervisor : The Clark Planetarium would like to request a position reclassification for an allocation that was approved by the County Council on June 20, 2017. The original request was for an Education Program Specialist (grade 14). We are now requesting a position reclassification to an Education Program Supervisor (grade 15). There is not a budgetary impact for FY17 as this position is still unfilled; however, the budgetary impact for FY18 is approximately \$8,787.</p>			

Fund Impact	
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Approvals	
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Schlag

8/2/17

SO

8.4.17

Holly Yocom Digitally signed by Holly Yocom
Date: 2017.08.04 11:16:27
-05'00'

8-4-17

Ein Trick

8/4/17

Deputy J. Dalton (for Varrin Casper)
Budget Adjustment D

8/4/17

Budget Adjustment Detail

35100000 CLARK PLANETARIUM

* Adjustment Title: Education Program Supervisor

[illegible]

\$0

Revenue Budget String(s):

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

TOTAL REVENUE CHANGE: \$0

Balance Sheet/Fund Unrestriction String(s): ☐ Bal sheet strings only required for Proprietary Fund adjustments or fund unrestrictedions; 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

* One Time Change (Y or N): N
If No, next year's impact: \$8,787

No. of New FTEs: 0.00 (2)
No. of New Time Limited FTEs: 0.00 (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

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

The Clark Planetarium would like to request a position reclassification for an allocation that was approved by the County Council on June 20, 2017. The original request was for an Education Program Specialist (grade 14). We are now requesting a position reclassification to an Education Program Supervisor (grade 15). There is not a budgetary impact for FY17 as this position is still unfilled; however, the budgetary impact for FY18 is approximately \$8,787.

(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.

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	7/1/2017
Existing/Proposed Job Code	
Existing/Proposed Job Title	Education Program Supervisor
Position Type: Full-Time (FT), Part-Time (PT)	FT
Time Limited? Yes / No	No
If Time Limited, expected expiration date	
Location Code (four digit number)	1098
Fund	To: From:
PS/BRASS Sub Department Id	To: From:
Reports To Position Number	00003788
Reports To Job Title	Education & Exhibit Manager
FTE (Example: .50 / .75 / 1.0)	To: 1 From: 0
Action Type: (New position (N), New TL (TL), Reclassification (R), Transfer (T), FTE Change/Re-Allocation (RA), Abolish (A), Other (O))	

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 TL (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	
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), Transfer (T), FTE Change/Re-Allocation (RA), Abolish (A), Other (O))	

Total No. of New FTEs:	0
Total No. of New Time Limited FTEs:	0
Total No. of Transferred FTEs:	0
Total No. of Other Actions:	1

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

Council Approval section below to be completed only by Council Staff and to be submitted to HR for final processing.				
Council Approved:	Yes:	No:	Date: _____	Signature: _____