## REQUEST FOR SL COUNTY BUDGET ADJUSTMENT

	51 FUR 51		DODOLI	AD000111		
	Executive S					
Reference No	: 250000YE01			For Fisc	al Year:	2017
<b>Requesting Organization</b>	: 25000000 L	LIBRARY		Date of R	equest:	3-Oct-17
Budget Adjust Type(s)	: Appropriation	n Unit Shift		Ongoing (	Y or N):	Ν
3 31 ( )			If Yes	, next year's	•	\$
				Net FTE C	•	0.00
Description and Just	fication:			Wett IL C	mange.	0.00
Appropriation Unit Shift: V		move funda fra	n the execting	anatas ta tha a	anital anatas	The
purchases to be made from the capital sector are replacement of 4 sets of RFID inventory gates used in the branches to help eliminate theft of materials. The current sets are no longer working and have surpassed their						
typical hardware lifecycle replacement date. A digital color copier to replace the current copier, which we are						
spending alot of time and f						
levels and time efficiencies						
Facilities staff in snow rem						
and reduce the risk of a fal						
and reduce the hak of a fall	r darring molerne	in weather.	e ATV allows u	a to agioniy die	al IIIC Walks	at our
		Fund Im	pact			
UMMARY OF FUND IMPACT BY	FUND					
UND:	360 LIBRARY					
	FUND					
und Impact (Budgetary)	\$0					
und Impact (Transfers)	\$0					
OTAL FUND IMPACT	\$0					
UMMARY OF CNTY FUNDING IN		REVENUE	EXPENSE	BAL SHEET	CNTY FUNDIN	G
500000101 ADMIN - MANAGE	MENT	0	(10,633)	0	(10,63	33)
500000202 SYSTEMS		0	41,700	0	41,7	00
500000300 MARKETING		0	55,000	0	55,0	00
500000400 FACILITIES		0	7,668	0	7,6	68
500000501 COLLECTION DEVE		0	(100,000)	0	(100,00	00)
500000713 SOUTH JORDAN LI	BRARY	0	6,265	0	6,2	65
OTALS	10	_ 0	. 0	0		0
Division Director:	-0	OOM	<b>-</b>	Date: 10 3	17	
Dept. or Elected Fiscal Mgr:	200	<u> </u>		Date:10 · 3		
Dept. Dir. or Elected Official	Ala U	+ M Go	a	Date: LO.	3.17	
acilities Division Director:				Date:		
Capital Projects Only)				-		
chief Financial Officer:	NU	h		Date: /D	3-17	
flayor or Designee:	CHO	pprove	ek	Date:	3-17	
council Action:	A	pprove		Date:		

		Budg	jet Adjustmer	nt Detai			
iget Year:	2017		* Requesting De	epartment:	250000	00 LIBRARY	٠
iget Period:	Post June Year-End	+ Req Item No:	250000YE01	♣ Adlustment	t Title:	Appropriation Unit Shift	
ustment Type(s	); Appropriation Unit Sh	m -			•		4-1
	dget String(s):		•				
FUND	AGENCY	SUB-DEPT ID	EXPENSE ACCOUNT	PROGJACT	ID (OPT)	PROJECT ID (CAP)	AMOUNT
360	020	2500000713	679020				6.2
360	020	2500000400	679020				7,6
360	020	2500000300	679005				55.0
360	020	2500000202	679020			i i	41,7
360	020	2500000501	611010			i i	(100,0
360	020	2500000101	621015				(10,0
360	020	2500000101	616035			ii	(6
		2000000707	0.10500				
			1				
			TOTALEA	PENDITURE	CHANGE:	,	NAME OF TAXABLE PARTY.
Revenue Bu	dget String(s):						
FUND	AGENCY	SUB-DEPT ID	REVENUE ACCOUNT	PROGIACT	ID (OPT)	PROJECT ID (CAP)	AMOUNT
			+				
	_						
-							
****							
			TOTA	L REVENUE	CHANGE:		
Balance Sho	et/Fund Unrestriction S	String(s): Bal sh	not strings only required for Prictions; check if applicable,	roprietery Fund (	Bdjustments	or fund	
FUND	SUB-	DEPT ID		T ACCOUNT		AMO	UNT
			BAL SHT	or 499999			
			BAL SHT	or 499999			
				or 499999			
		111111111111111111111111111111111111111	TOTAL BALA	NCE SHEET	CHANGE:		
# If Yo	Ongoing (Y or N): BB, next year's impact:	N \$0		No. of Ne nw Time Limit of Transfern No. of Oth	ed FTEe: ed FTEe;	0.00	(2) (2) (2) (2)
Fund Balanc	ce Transfers:						
From Fun	d From Dapt ID	To Fund	To Dept ID	Amou	int	1	
		17.1.5.00	12.55			1	
						1	
						i	
		1	1	t — —		1	

We would like to move funds from the operating sector to the capital sector. The purchases to be made from the capital sector are replacement of 4 sets of RFID inventory gates used in the branches to help eliminate their of materials. The current sets are no longer working and have surpassed their typical hardware lifecycle replacement date. A digital color copier to replace the current copier, which we are spending alot of time and funds to maintain. This purchase will reduce maintenance charges, improve production levels and time efficiencies, improve productivity and prevent work-related injuries. An ATV to assist our Facilities staff in anow removal at our libraries. This will increase the safety of our patrons and our employees and reduce the risk of a fall during inclement weather. The ATV allows us to quickly clear the walks at our various libraries, which can be required multiple times during some snow storms. During the growing season, the ATV is used to essist with grounds maintenance, including spreading fertilizer and assisting with the planting of shrubs and trees. Signage for the outside of the South Jordan branch. The current signage at our South Jordan Library does not clearly identify the facility as being a County building. This request of replacing the signage supports our goal of enturing that his literary buildings are clearly identified as being and of Salt Lake County.

(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.

(2) For FTE related requests, complete and print the "Position" tab. Totals from that tab will be carried over to here.

2017

For Fiscal Year:

## **REQUEST FOR BUDGET ADJUSTMENT**

**Executive Summary** 

**Reference No: 250000 08** 

Mayor Financial Administration

Requesting Organization: 25000000 LIBRARY Budget Adjust Type(s): FTE/Position Reclass				Date of R me Change ( , next year's	Y or N):	Oct-17 N
	FTE/Position	n Reclass	IT NO	, next year's Net FTE C	•	(\$2,283) 0.00
Description and Justi		III NECIASS		METLIE	mange:	0.00
Reclassification-Tyler Cust		past the 20 hour	Custodian at T	vler Library had	s struggled to b	een un
with building maintenance						
homeless population. Extr						
		Fund Im	pact			
SUMMARY OF FUND IMPACT BY	FUND					
FUND:	360 LIBRARY					
	FUND					
Fund Impact (Budgetary)	\$0					
Fund Impact (Transfers)	\$0					
TOTAL FUND IMPACT	\$0					
SUMMARY OF CNTY FUNDING IN	PACT BY DEPT	REVENUE	EXPENSE	BAL SHEET	CNTY FUNDING	1
TOTALS		0	0		CITTYONDING	-
Approvals						
Division Director:		QQOI		Date: 10/		
Dept. or Elected Fiscal Mgr:				Date:		
Dept. Dir. or Elected Official:	Hall	S. M. Gen	4	Date:	3-17	
Facilities Division Director:		· ·		Date:		
(Capital Projects Only)		1				
Chief Financial Officer:	X	Approve	- 19)	Date:	-3-12	
Mayor or Designee:	Eliv	Approve	el .	Date:	3117	
Council Action:	=	Approve		Date:		
	Bud	dget Adjusti	ment Detail			
Budget Year: 2017		≠ Request	ling Department:	25000000 LIBR AR	Y	

Page 1 of 2

Expense Budget Str  FUND 360  Revenue Budget Str	AGENCY 020	SUB-DEPT ID 2500000300	EXPENSE ACCOUNT 601030 PERMANENT AND TOTAL EX		PROJECT ID (CAP)	AMOUNT
FUND 360  Revenue Budget Sti	AGENCY 020	2500000300	601030 PERMANENT AND	PROVISIONAL	PROJECT ID (CAP)	AMOUNT
Revenue Budget Sti	020	2500000300	601030 PERMANENT AND	PROVISIONAL	PROJECT ID (CAF)	AMOUNT
Revenue Budget Sti	ring(s):					
		SUB-DEPT ID	TOTAL EX	PENDITURE CHANGE:		
		SUB-DEPT ID	TOTAL EX	PENDITURE CHANGE:	The state of the s	
		SUB-DEPT ID	TOTAL EX	PENDITURE CHANGE:	and the state of t	
		SUB-DEPT ID	TOTAL EX	PENDITURE CHANGE:	tion.	
		SUB-DEPT ID			10	
FUND	AGENCY	SUB-DEPT ID				
			REVENUE ACCOUNT	PROG/ACT ID (OPT)	PROJECT ID (CAP)	AMOUNT
			TOTAL	L REVENUE CHANGE:		
D-1					•	
Balance Sheet/Fund		urvostr	oot strings only required for Prictions; check if applicable.			-
FUND	SUB-L	DEPTID	BAL. SHEET	ACCOUNT	AMOUN	III.
			BAL_SHT or 499999 BAL_SHT or 499999			
			BAL_SHT or 499999			
				NCE SHEET CHANGE:		
* One Time Ch	nange (Y or N):	N		No. of New FTEs:	0.00 (2)	ji.
	year's Impact:		No. of Ne	w Time Limited FTEs: 🧍	0.00 (2)	j
	1 1 2		No.	of Transferred FTEs:	0.00 (2)	f.
				No. of Other FTEs:	0.00 (2)	Ŋ
	fers:					
Fund Balance Trans			To Dept ID	Amount		
Fund Balance Trans	From DeptID	To Fund				
	From DeptID	To Fund				

in the past the 20 hour Custodian at Tyler Library has struggled to keep up with building maintenance and daily pickup of grounds. This is an older building in a location that has a large homeless population. Extra time is needed to help keep the grounds clear and safe for patrons.

## **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)			3129	
Existing/Proposed Job Start Date	9/16/2017			
Existing/Proposed Job Code			467	
Existing/Proposed Job Title	1	Libr	ary Shelver	
Position Type: Full-Time (FT), Part-Time (PT)		743.00	PT	
Time Limited? Yes / No	N			
If Time Limited , expected expiration date				
Location Code (four digit number)			1027	
Fund	To From:			
PS/BRASS Sub Department Id	To: Fram			
Reports To Position Number	1		2849	
Reports To Job Title	Circulation Spv			
FTE (Example: .50 / .75 / 1.0)	To	0	From:	-0.25
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)			2894	
Existing/Proposed Job Start Date	9/16/2017			
Existing/Proposed Job Code 555			555	
Existing/Proposed Job Title		Custodial M	sintenance Worke	,
osition Type, Full-Time (FT), Part-Time (PT)			PT	
Time Limited? Yes / No	N			
If Time Limited, expected expiration date				
Location Code (four digit number)			1245	
Fund	To: From:			
PS/BRASS Sub Department Id	Ta: From:			
Reports To Position Number			3063	
Reports To Job Title	Library Manager			
FTE (Example: 50 / .75 / 1.0)	To.	0.75	Fram:	-0.5

Position 3					
Position Number (For changes to existing positions)	1				
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		TOTAL STATE OF THE			
Reports To Job Title					
FTE (Example: .50 / .75 / 1.0)	To:	From:			

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

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

Council Approval sec	llon below to be	completed onl	y by Council Staff and	to be submitted to HR for final processing.
Council Approved:	Yes:	No:	Date:	Signature:

## Action Type List:

N New

TL New Time Limited R Reclass

Transfer

A Abolish

RA Re-allocate

O Other

Reclass Flag

	,	NOTES	28,977 Vacant - Mose	13,793 used 1/2 of budgeted amoun	40,486 Vacant - to be filled.
		TOTALS	\$ 28,977	\$ 13,793	\$ 40,486
603050		401K Health Ins.	13,605	6,803	17,490
603040 603045		401K   H	\$ 60 \$ 204 \$	\$ 96 \$	\$ 310 \$
-		_		\$ 24	\$ 88
603025		Retirement LTD	\$ 1,848	\$ 840	\$ 2,765
603005		FICA	948	432	1,409
601030	Salary	(Merit)	12,312	\$ 865'5	18,424 \$
_		_	s	₩.	₩.
		FTE	0.50	0.25	0.75
		Grade	6	7	6
		Job Code	555	467	255
		Job Title	% FTE Fr 250000717 2894 Custodial Maint Worker	250000715 3129 Library Shelver	To 2500000717 2894 Custodial Maint Worker
	Position	*	2894	3129	2894
		Ref Type To Dept ID	2500000717	2500000715	2500000717
	뜐	2	Ŧ	<u>ቱ</u>	P <sub>O</sub>
	Reclass	Type	% FTE		
		Ref			

77 \$ 4 \$ 10 \$ (2,918) \$ (2,283) 0.00 \$ 514 \$ 29 \$ 77 \$ 4 \$ 10 \$ (2,918) \$ (2,283) \$ 62 514 \$ \$ 00.0 TOTAL IMPACT ANNUALLY Net Impact



## Salt Lake County Job Description

## **Custodial Maintenance Worker**

**DEPARTMENT:** Human Services

**DIVISION:** Library/2500

JOB CODE: 555 GRADE: 009

FLSA STATUS: Non-Exempt

**SALARY PLAN: GEN** 

**EFFECTIVE DATE: 04/01/2011** 

**SAFETY SENSITIVE: No** 

#### **JOB SUMMARY**

Performs custodial cleaning, minor maintenance work and general building security in an assigned building or building area.

## **MINIMUM QUALIFICATIONS**

Six (6) months custodial work experience or other closely related field; OR an equivalent combination of related education and experience.

## **ESSENTIAL FUNCTIONS**

The following duties and responsibilities are intended to be representative of the work performed by the incumbent(s) in this position and are not all-inclusive. The omission of specific duties and responsibilities will not preclude it from the position.

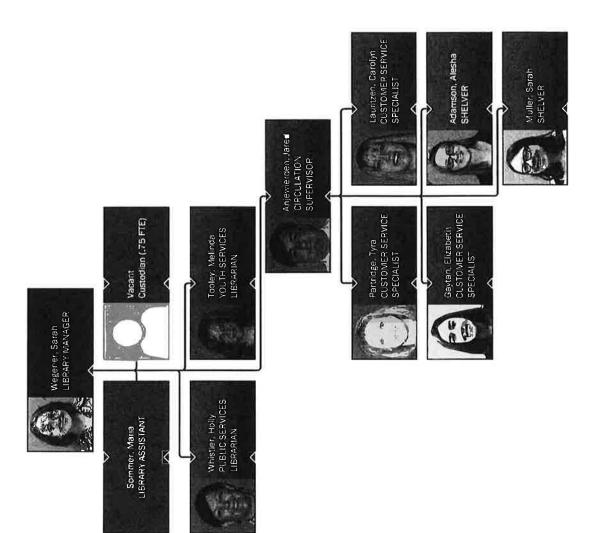
Applicants must be prepared to demonstrate the ability to perform the essential functions of the job with or without a reasonable accommodation.

- Provides daily custodial tasks including cleaning facility and equipment.
- Arranges, sets up and takes down facility tables and chairs, as assigned.
- Provides periodic duties of washing furniture, floors, walls, woodwork and windows.
- Performs cleaning, preventative maintenance and minor repairs on cleaning equipment.
- Performs minor plumbing and electrical maintenance and repair.
- Maintains and cleans building entrances. Assists with grounds maintenance and removes snow and ice from entrances as assigned.
- Maintains an inventory of facility cleaning supplies, tools and equipment. Orders new cleaning supplies as needed.
- Conducts security check of grounds and buildings. Secures the facility and equipment.

## KNOWLEDGE, SKILLS AND ABILITIES (KSA)

## Knowledge of:

Methods, materials and equipment essential for custodial maintenance functions



# SALT LAKE COUNTY COUNTY SERVICES

**Tyler** 9/22/2017

Version Date: 03/08/217



# 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: 🦠 FT	Position Change					
Department Name: Community Services	Position Number: 000	02894, 00003129				
Division Name: Library Services	Division Number: 250	0000717				
Information Regarding Vacant Existing Allocation						
Current Job Title/Grade: Custodial Maint Worker 9, Library Shelver 7 Job Code: 555, 467						
New Existing Title/Grade: Custodial Maintenance Work	er 9					
Agency Bu	Agency Budget Impact:					
There <u>is no</u> budget increase to this year or subsequent year's budgets resulting from this position classification change. Please provide an explanation below:						
Budget Impact projection = Savings of (\$2283) We will use remaining .25 of unused shelver allocation, position # 3129 Position # 2894, Custodian will go from 20 to 30 hours per week.						
2) There <u>is</u> an increase to this year or subsequent year's budgets. Below is a summary of the budget impact:						
The budget impact for this classification change is unknown at this time.						
<u>Business Justification:</u> Please provide a brief summary of the organization need or business justification for this position classification request.						
In the past the 20 hour Custodian at Tyler Library has strupickup of grounds. This is an older building in a location to keep the grounds clean and safe for patrons.						



Version Date: 03/08/217



***************************************		
	Department/Divisi	on Approval Signatures
	the current year's personnel	this certifies that processing this classification action does not budget. Any budgetary impact has already been addressed
Elected Official or Department Director	Approved: _Yes _No	Signature: Dollo M. Open
Division Director/ Administrator	Approved:  Yes No	Signature: James D. Cooper Digitally signed by James D. Cooper Date: 2017,09,06 16:11:40 .06'00'
Immediate Supervisor	Approved: ✓Yes □No	Signature: Pamela Park Date: 2017.09.06 16:00:24 -06'00'
Immediate Supervisor's	Title: Pamela Park	
E-Mail: PPark@slcolibrar	y.org	Phone Number: 801-944-7500

HR Consultant Contact Information								
E-Mail	Phone							
dwine@slco.org	(385) 468-0574							
tbvington@slco.org	(385) 468-0588							
mpenrod@slco.org	(385) 468-0592							
tfortner@slco.org	(385) 468-0591							
	E-Mail  dwine@slco.org  tbvington@slco.org  mpenrod@slco.org							

# **REQUEST FOR BUDGET ADJUSTMENT**

	xecutive S	ummary							
Reference No	: 230000YE01			For Fisc	al Year:	2017			
Requesting Organization	: 23000000 A	AGING AND	ADULT S	Date of R	eauest:	29-Sep-17			
Budget Adjust Type(s)				me Change (	•	N N			
Buagot Hajabt Typo(b)	Appropriation			, next year's	•	\$0			
	Appropriation	i Onit Still	II NO	. •					
				Net FTE C	nange:	1.00			
Description and Justin						. 4 FTF			
DWS Senior Case Mgt Gran									
new time limited position, to									
request the FTE allocation at request. The grant is effective									
request. The grant is ellective	e August 1, 201	ir to July 31, 2	ozo. The conti	act was execut	eu 03/20/20	717.			
AAS also requests to replace	an oven in Dra	aner Senior Ce	nter hecause t	he current one	cannot be r	engired This			
expense will be absorbing by									
Capital Purchasing appropria		daget, noweve	17010 1001		auget nom	Operating to			
Capital Falcindoning approprie	tion unit.								
		Fund Im	pact						
SUMMARY OF FUND IMPACT BY	FUND								
FUND:	120 GRANT								
	PROGRAMS FU	ND							
Fund Impact (Budgetary)		\$0							
Fund Impact (Transfers)		\$0							
TOTAL FUND IMPACT		\$0							
SUMMARY OF CNTY FUNDING	MPACT BY DEPT								
DEPT		REVENUE	EXPENSE	BAL SHEET	CNTY FUND	ING			
2300000401 MOW		0	(8,000)	0	(8,0	000)			
2300000603 CAREGIVER		9,166	9,166	0		0			
2300000702 CENTERS		0	8,000	0	8,	,000			
TOTALS 9,166 9,166 0 0									
Approvals									
Division Director:	Paul Legge	Dale: 2017.10.02 08.26:33	ggett	Date:					
Dividion Director		Digitally signed by Yanpi	ng						
Dept. or Elected Fiscal Mgr:	Yanping Din	Ding Date: 2017 10.02 08;28;	23	Date:	72				
Dopt. of Elected 1 local high.	Karen	Digitally signed by Keren							
Dept. Dir. or Elected Official:		Crompton Date: 2017.10.02 08:51:3	31	Date:					
pope bir, or Licotta Giriolar.	Crompton	-06:00:							
Facilities Division Director:/				Date:					
(Capital Projects Only)				Date.					
(Capital Projects Only)	$\sim$ $A$ .				,				
Chief Financial Officer:	101			Date: / <sup>O</sup> /	2/17				
Chief Philancial Officer.	- 400	nnrovo C	0_	Date. 7	7 11				
	<b>∠</b> `. ^\	pprove R		i A					
Mayor or Dogicase:	ULI		aex	Date:	4117	~			
Mayor or Designee:	Α.	nnrovo		Date.					
	A	pprove							
Council Action:				Date					
Council Action.	-			Date:					
Mayor Financial Administration		Page 1 of 2	1			Version 88 2/7/2017			

-	Approve	
•		

		Budg	jet Adjustmei	nt Detail		
et Year:	2017		* Requesting D	epartment: 2300	0000 AGING AND ADULT SE	RVICES
et Period:	Post June Year-End	* Req Item No:	230000 YE 01 -	◆ Adjustment Title:	DWS Sentor Case MgI Grant &	Replacing an oven
stment Type(s):	FTE Request		Appropriation U	nit Shift -		
Expense Bud	get String(s):					
FUND	AGENCY	SUB-DEPT ID	EXPENSE ACCOUNT	PROG/ACT ID (OPT)	PROJECT ID (CAP)	AMOUNT
120	020	2300000603	601030			6,0
120	020	2300000603	603005			46
120	020	2300000603	603025			90
120	020	2300000603	603040			
120	020	2300000603	603045			1.
120	020	2300000603	603050			1,59
120	020	2300000401	609005			(8,00
120	020	2300000702	679020			8,00
			TOTAL EX	PENDITURE CHANGE	<u></u>	\$9,16
Revenue Budg	AGENCY	SUB-DEPT ID	REVENUE ACCOUNT	PROG/ACT ID (OPT)	PROJECT ID (CAP)	AMOUNT
120	020	2300000603	415000 FEDERAL GOVER		PROJECT ID (CAP)	9,1
120	020	2300000003	413000 FEDERAL GOVER	AMENI OKANIS		9,11
	-				+	
					+	
			1			
		1				
				A DEVENUE CUANCE		80.40
Balance Sheet	VFund Unrestriction S	String(s): <sub> </sub> - Bal st	TOTA neet strings only required for Po	L REVENUE CHANGE	-	\$9,16
Balance Sheet		String(s): Bal st check DEPT ID	neet strings only required for Pr if applicable.		-	
		check	neet strings only required for Pr if applicable.	oprietary Fund adjustments	or fund unrestrictions;	
		check	neet strings only required for Pr if applicable. BAL. SHEE	oprietary Fund adjustments	or fund unrestrictions;	
		check	neet strings only required for Priferable.  BAL. SHEE  BAL_SHT or 499999	oprietary Fund adjustments	or fund unrestrictions;	
		check	BAL. SHEE  BAL. SHEE  BAL SHT or 499999  BAL SHT or 499999  BAL SHT or 499999	oprietary Fund adjustments	or fund unrestrictions;	NT
FUND	SUB-I	Check	BAL. SHEE  BAL. SHEE  BAL SHT or 499999  BAL SHT or 499999  BAL SHT or 499999	oprielary Fund adjustments  FACCOUNT  NCE SHEET CHANGE	or fund unrestrictions;  AMOUR	NT S
* One Tir	SUB-I	DEPT ID	BAL. SHEE  BAL. SHEE  BAL. SHT or 499999  BAL. SHT or 499999  BAL. SHT or 499999  TOTAL BALA	oprietary Fund adjustments  FACCOUNT  NCE SHEET CHANGE  No. of New FTEs:	or fund unrestrictions;  AMOUR  0.00 (2	NT S
* One Tir	SUB-I	DEPT ID	BAL. SHEE  BAL. SHT or 499999  BAL. SHT or 499999  BAL. SHT or 499999  TOTAL BALA  No. of Ne	oprielary Fund adjustments  FACCOUNT  NCE SHEET CHANGE  No. of New FTEs: w Time Limited FTEs:	Or fund unrestrictions;  AMOUF  0.00 (2 1.00 (2	NT
* One Tir	SUB-I	DEPT ID	BAL. SHEE  BAL. SHT or 499999  BAL. SHT or 499999  BAL. SHT or 499999  TOTAL BALA  No. of Ne	Oprielary Fund adjustments  FACCOUNT  NCE SHEET CHANGE  No. of New FTEs: w Time Limited FTEs: of Transferred FTEs:	0.00 (2 1.00 (2 0.00 (2	NT
* One Tir	me Change (Y or N):	DEPT ID	BAL. SHEE  BAL. SHT or 499999  BAL. SHT or 499999  BAL. SHT or 499999  TOTAL BALA  No. of Ne	oprielary Fund adjustments  FACCOUNT  NCE SHEET CHANGE  No. of New FTEs: w Time Limited FTEs:	0.00 (2 1.00 (2 0.00 (2	NT
* One Tir	me Change (Y or N):	DEPT ID	BAL. SHEE  BAL. SHT or 499999  BAL. SHT or 499999  BAL. SHT or 499999  TOTAL BALA  No. of Ne	Oprielary Fund adjustments  FACCOUNT  NCE SHEET CHANGE  No. of New FTEs: w Time Limited FTEs: of Transferred FTEs:	0.00 (2 1.00 (2 0.00 (2	NT
* One Tir	me Change (Y or N): next year's impact: Transfers:	DEPT ID	BAL. SHEE  BAL. SHT or 499999  BAL. SHT or 499999  BAL. SHT or 499999  TOTAL BALA  No. of Ne	Oprielary Fund adjustments  FACCOUNT  NCE SHEET CHANGE  No. of New FTEs: w Time Limited FTEs: of Transferred FTEs:	0.00 (2 1.00 (2 0.00 (2	NT
* One Tir If No,	me Change (Y or N): next year's impact: Transfers:	DEPT ID  N \$0	BAL. SHEE  BAL. SHEE  BAL. SHT or 499999  BAL. SHT or 499999  BAL. SHT or 499999  TOTAL BALA  No. of Ne	oprielary Fund adjustments  FACCOUNT  NCE SHEET CHANGE  No. of New FTEs: w Time Limited FTEs: No. of Other FTEs:	0.00 (2 1.00 (2 0.00 (2	NT
* One Tir If No,	me Change (Y or N): next year's impact: Transfers:	DEPT ID  N \$0	BAL. SHEE  BAL. SHEE  BAL. SHT or 499999  BAL. SHT or 499999  BAL. SHT or 499999  TOTAL BALA  No. of Ne	oprielary Fund adjustments  FACCOUNT  NCE SHEET CHANGE  No. of New FTEs: w Time Limited FTEs: No. of Other FTEs:	0.00 (2 1.00 (2 0.00 (2	NT
* One Tir If No,	me Change (Y or N): next year's impact: Transfers:	DEPT ID  N \$0	BAL. SHEE  BAL. SHEE  BAL. SHT or 499999  BAL. SHT or 499999  BAL. SHT or 499999  TOTAL BALA  No. of Ne	oprielary Fund adjustments  FACCOUNT  NCE SHEET CHANGE  No. of New FTEs: w Time Limited FTEs: No. of Other FTEs:	0.00 (2 1.00 (2 0.00 (2	\$( ) )

AAS received a new grant from DWS, which requires 1 FTE new time limited position, to provide case management services to senior refugee population. This request is to request the FTE allocation and the appropriation, and also to recognize the revenues. It is a budget neutral request. The grant is effective August 1, 2017 to July 31, 2020. The contract was executed 09/28/2017.

AAS also requests to replace an oven in Draper Senior Center because the current one cannot be repaired. This expense will be absorbing by AAS current budget, however AAS will need to move the budget from Operating to Capital Purchasing appropriation unit.

# 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		1	1/1/2017		
Existing/Proposed Job Code	1		400		
Existing/Proposed Job Title		Outreach	Caseworker 13		
Position Type: Full-Time (FT), Part-Time (PT)			FT		
Time Limited? Yes / No			Yes		
If Time Limited , expected expiration date		7	/31/2020		
Location Code (four digit number)			1005		
Fund	To:		From:		
PS/BRASS Sub Department Id	To:		From:		
Reports To Position Number		2345			
Reports To Job Title		Asst Program Mgr			
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))			TL		

C:\Users\yding\AppData\Loca\Microsoft\Windows\Temporary Internet Files\Content.Outlook\QSNH2ZZE\\\\Budget Impact Analysis-TIME LIMITED REFUGEE OUTREACH CASE WORKER.xisx\230000FTE02

AAS FTE rectass	budget impac	t analysis					601030	603005	603025	603040	603045	050E09		Fund Sources	
Dent ID	Pocition B	Fmolovee	2	loh Tela	Joh Code	35	Salary	CICA	Dobinomont	a.	404 14	Garable for	TOTALE	Outside	1
				2011 000	יים בחתב	4	(Merit)	5	Vernement	2	WTOM	nearm Ins.	IOIAES	Revenues	lax Dollars

Umited New FTE New 2300000603

Outreach Caseworker 13 Time

400

1.00 \$ 36,320,00 \$ 2,778.00 \$ 5,448.00 \$ 180.00 \$ 726.00 \$ 9,548.00 \$ 55,000.00 \$ 55,000.00

30,00 \$ 121,00 \$ 1,591,33 \$ 9,166,67 \$ 9,166,67

2017 \$ 6,053.33 \$ 463.00 \$ 908.00 \$

Est,

November 1 to December 31

s

Net Annual Impact

This position is required for a grant through DWS for elder Refugee case management Contract #18DW50080, Budget is annual expense.

Existing positions used to create the budget needs for this position. Benefits could differ with actual hire. Agency could balance any additional expenses in using the Temp/Seasonal line item

## REQUEST FOR BUDGET ADJUSTMENT

Executive Summary			
Reference No: 505000YE10	For Fiscal Year:	2017	_
Requesting Organization: 50500000 CAPITAL IMPROVEME	Date of Request:	22-Sep-17	
Budget Adjust Type(s): New Capital Project One Ti	me Change (Y or N):	Υ	
If No	, next year's impact:	<b>\$</b> C	)
	Net FTE Change:	0.00	
Description and Justifications	•		

Description and Justification:

New Capital projects: Capital Project FAC151C: The lower level exhaust study is a project to study the redesign and replacement current exhaust system. The south building lower level kitchen has continually added equipment that rejects heat into the lower level parking garage. That and with added vehicle traffic from the Meal on Wheel program is creating a potentially unsafe work environment from heat, carbon monoxide level and poor air quality. If not addressed there is a potential impact for the indoor air quality for the entire south building of the government center. Capital Project FAC152C: The kitchen AHU study is a project to study the redesign and replacement of the current AHU serving the lower level kitchen. This unit is past it's useful life cycle. In addition the kitchen has added more heat load due to added equipment and increased output for the Meals on Wheels program.

# **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			

Division Director:  Dept. or Elected Fiscal Mgr:  Dept. Dir. or Elected Official:  Date: 9  Facilities Division Director: (Capital Projects Only)  Chief Financial Officer:  Date: 9  Mayor or Designee:  Date: 9  Approve	
Dept. Dir. or Elected Official:  Facilities Division Director: (Capital Projects Only)  Chief Financial Officer:  Date: 9  Approve  Mayor or Designee:  Date: 9  Date	22/17
Facilities Division Director: (Capital Projects Only)  Chief Financial Officer:  Approve  Mayor or Designee:  Date: 9  Approve  Date: 9	-27-17
(Capital Projects Only)  Chief Financial Officer:  Approve  Mayor or Designee:  Date:	-27-17
Mayor or Designee:  Approve  Date:	22 17
Mayor or Designee: Date: 10	128/17
7,65,070	1417
Council Action: Date:	

		Budg	get Adjustmei	nt Detail		
et Year:	2017		* Requesting D	epartment: 5050	0000 CAPITAL IMPROVEME	ENTS
et Period:	Post June Year-End	Reg Item No:	505000YE 10	* Adjustment Title:	New Capital projects	
tment Type(s)	New Capital Project			3	L	
Expense Bud	lget String(s):					
FUND	AGENCY	SUB-DEPT ID	EXPENSE ACCOUNT	PROGIACT ID (OPT)	PROJECT ID (CAP)	AMOUNT
450	050	5050000000	675010		AGE2017TEABAT	(30,0
450	050	5050000000	675010		FAC151C	17,00
450	050	5050000000	675010		FAC152C	13.00
	0.00	303000000	473010		FAC132C	13,0
					<b>i</b>	
			TOTAL EX	PENDITURE CHANGE		s
	get String(s):	CUO DERTID	TOTAL ACCOUNT	DOOG WAT IN CORT	L DDG (FOT ID (CAD)	AMOUNT
FUND	AGENCY	SUB-DEPT ID	REVENUE ACCOUNT	PROGIACT ID (OPT)	PROJECT ID (CAP)	AMOUNT
			TOTA	L REVENUE CHANGE		S
Balance Shee	eVFund Unrestriction S	tring(s): Palsh	neet strings only required for Pi		···	
FUND	SUB-	DEPT ID		TACCOUNT	AMOL	INT
			BAL_SHT or 499999			
			BAL SHT or 499999			
			BAL_SHT or 499999			
			TOTAL BALA	NCE SHEET CHANGE		
* One T	ime Change (Y or N):	Y	=	No. of New FTEs:	0.00	(2)
	, next year's impact:		No. of Ne	w Time Limited FTEs:		(2)
				. of Transferred FTEs:		(2)
			110	No. of Other FTEs:		(2)
Fund Balance	Transfers					-/
From Fund	From Dept ID	To Fund	To Dept ID	Amount	-	
				Mines of the second	1	
					]	
					1	

Capital Project FAC151C: The lower level exhaust study is a project to study the redesign and replacement current exhaust system. The south building lower level kitchen has continually added equipment that rejects heat into the lower level parking garage. That and with added vehicle traffic from the Meal on Wheel program is creating a potentially unsafe work environment from heat, carbon monoxide level and poor air quality. If not addressed there is a potential impact for the indoor air quality for the entire south building of the government center. Capital Project FAC152C: The kitchen AHU study is a project to study the redesign and replacement of the current AHU serving the lower level kitchen. This unit is past it's useful life cycle. In addition the kitchen has added more heat load due to added equipment and increased output for the Meals on Wheels program.

# **REQUEST FOR BUDGET ADJUSTMENT**

	Executive S	Summary	1				
Reference No	: 505000YE11	1		For Fisc	al Year:	2017	
Requesting Organization	: 50500000	CAPITAL I	MPROVEME	Date of F	Request:	22-Sep-	17
Budget Adjust Type(s)	: New Capital	Project	One	Time Change	Y or N):	Υ	
	•	•		No, next year's	-		\$0
				Net FTE	Change:	0.00	
Description and Justi	fication:				_		
New Capital projects: Capital Project AGE stone and its installation to see if it can be							ew the
		Fund	Impact				
SUMMARY OF FUND IMPACT BY	Y FUND	1					
FUND:	450 CAPITAL						
	IMPROVEMENT	TS 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 FUND	ING	
TOTALS			0	0 0		0	
		Арр	rovals				
Division Director:	Din			Date: 9	2/17	·	
Dept. or Elected Fiscal Mgr:	M	0			27-17		
Dept. Dir. or Elected Official:	HUI	126		Date:	-77-	17	
Facilities Division Director: (Capital Projects Only)			<del>- 1</del> 2	Date: 9	12/17		
Chief Financial Officer:	A	approve		Date: <u>9/2</u>	28/17		
Mayor or Designee:	Α	pprove		Date:			
Council Action:	A	pprove		Date:			

		Budg	get Adjustmer	nt Detail		
et Year:	2017		* Requesting D	epartment: 5050	0000 CAPITAL IMPROVEME	NTS
et Period:	Post June Year-End -	≠ Req Item No:	505000YE11	* Adjustment Title:	New Capital projects	
tment Type(s):	New Capital Project	•		*		
Expense Budg	et String(s):					
FUND	AGENCY	SUB-DEPT ID	EXPENSE ACCOUNT	PROG/ACT ID (OPT)	PROJECT ID (CAP)	AMOUNT
450	050	5050000000	675010	1,	AGE2017TEABAT	(10,0
450	050	5050000000	607015		AGE2017RVASTO	10,00
	-					
	+				-	
			TOTALE	PENDITURE CHANGE	-	
Revenue Budg	et String(s):					
FUND	AGENCY	SUB-DEPT ID	REVENUE ACCOUNT	PROGIACT ID (OPT)	PROJECT ID (CAP)	AMOUNT
			<u> </u>			
			<b>†</b>			
			<u> </u>			
					ì	
			TOTA	AL REVENUE CHANGE		
Balance Sheet	/Fund Unrestriction S	tring(s): - Balsh check	eet strings only required for Pr if applicable.	roprietary Fund adjustments	or fund unrestrictions;	
FUND	SUB-	DEPT ID		TACCOUNT	AMOU	INT
			BAL_SHT or 499999			
			BAL SHT or 499999			
			BAL SHT or 499999	ANCE SHEET CHANGE	:	\$
						•
	ne Change (Y or N): next year's Impact:	ΥΥ	No. of No.	No. of New FTEs: w Time Limited FTEs:		2) 2)
n no,	next year a impact.			of Transferred FTEs:		
			No	No. of Other FTEs:		2) 2)
Fund Balance	Transfers:					
From Fund	From Dept ID	To Fund	To Dept (D	Amount	1	
			1		-	
			<u> </u>		j	

Capital Project AGE2017RVASTO: The stone façade at Riverton Senior Center is falling off of the facility in a variety of areas. This study is to review the stone and its installation to see if it can be reattached as originally designed, attached in a different way or if a new façade is the best long term approach.

# **REQUEST FOR BUDGET ADJUSTMENT**

Executive Summary		
Reference No: 505000YE06	For Fiscal Year:	2017
Requesting Organization: 50500000 CAPITAL IMPROVEME	Date of Request:	25-Sep-17
Budget Adjust Type(s): New Capital Project One Tim	e Change (Y or N):	Υ
If No, r	next year's impact:	\$0
	Net FTE Change:	0.00
Description and Justification:		
CJS Space Utilization Remodel: To accommodate additional staff requirer	ments project is to desig	n and

# Fund Impact

SUMMARY OF FUND IMPACT BY FUND						
FUND: 110 GENERAL 450 CAPITAL						
	FUND	IMPROVEMENTS FUND				
Fund Impact (Budgetary)	\$16,018	(\$16,018)				
Fund Impact (Transfers)	\$0	\$0				
TOTAL FUND IMPACT	\$16,018	(\$16,018)				

remodel/construction of additional office spaces in the current CJS facility.

SUMMARY OF CNTY FUNDING IMPACT BY DEPT							
DEPT	REVENUE	EXPENSE	BAL SHEET	CNTY FUNDING			
2400000101 CRIMINAL JUSTICE ADMIN	0	(16,018)	0	(16,018)			
5050000000 CAPITAL IMPROVEMENTS PRGM	o	16,018	0	16,018			
TOTALS	0	0	0	0			

	Approvals
Division Director:	Date: 9 25 17
Dept. or Elected Fiscal Mgr:	Date: 9-27-17
Dept. Dir. or Elected Official:	Date: 9-27-17
Facilities Division Director: (Capital Projects Only)	Date: 9 25 17
Chief Financial Officer:	Date: 9/201/7
Mayor or Designee:	Date: 10H117
Council Action:	Date:

get Year:	AMOUNT (67.61 (40.00 (16.0°
Expense Budget String(s):   SUB-DEPT ID   EXPENSE ACCOUNT   PROG/ACT ID (OPT)   PROJECT ID (CAP)	(67.66 (40.00 (16,0
## One Time Change (Y or N):    FUND   AGENCY   SUB-DEPT ID   EXPENSE ACCOUNT   PROG/ACT ID (OPT)   PROJECT ID (CAP)	(67.66 (40.00 (16,0
FUND   AGENCY   SUB-DEPT ID   EXPENSE ACCOUNT   PROG/ACT ID (OPT)   PROJECT ID (CAP)	(67.66 (40.00 (16,0
S0	(67.66 (40.00 (16,0
S0	(40.00 (16,0
# One Time Change (Y or N):    S050   24000000101   807015   CJS02	(16,0
# One Time Change (Y or N):  Y No. of New FTEs: 0.00 (2)	
Revenue Budget String(s):    FUND   AGENCY   SUB-DEPT ID   REVENUE ACCOUNT   PROG/ACT ID (OPT)   PROJECT ID (CAP)	123,6
Revenue Budget String(s):    FUND   AGENCY   SUB-DEPT ID   REVENUE ACCOUNT   PROG/ACT ID (OPT)   PROJECT ID (CAP)	
Revenue Budget String(s):    FUND   AGENCY   SUB-DEPT ID   REVENUE ACCOUNT   PROG/ACT ID (OPT)   PROJECT ID (CAP)	
Revenue Budget String(s):    FUND   AGENCY   SUB-DEPT ID   REVENUE ACCOUNT   PROG/ACT ID (OPT)   PROJECT ID (CAP)	
FUND AGENCY SUB-DEPT ID REVENUE ACCOUNT PROG/ACT ID (OPT) PROJECT ID (CAP)  TOTAL REVENUE CHANGE:  Balance Sheet/Fund Unrestriction String(s):  FUND SUB-DEPT ID BAL. SHEET ACCOUNT AMOUNT  BAL_SHT or 499999  BAL_SHT or 499999  BAL_SHT or 499999  TOTAL BALANCE SHEET CHANGE:  * One Time Change (Y or N):  Y No. of New FTEs: 0.00 (2)	
TOTAL REVENUE CHANGE:  Balance Sheet/Fund Unrestriction String(s):  FUND SUB-DEPT ID  BAL. SHEET ACCOUNT  BAL. SHT or 499999  BAL. SHT or 499999	AMOUNT
Balance Sheet/Fund Unrestriction String(s):  FUND SUB-DEPT ID BAL. SHEET ACCOUNT AMOUNT  BAL. SHT or 499999  BAL. SHT or 499999  BAL. SHT or 499999  TOTAL BALANCE SHEET CHANGE:  * One Time Change (Y or N): Y No. of New FTEs: 0.00 (2)	711100111
Balance Sheet/Fund Unrestriction String(s):  FUND SUB-DEPT ID BAL. SHEET ACCOUNT AMOUNT  BAL. SHT or 499999  BAL. SHT or 499999  BAL. SHT or 499999  TOTAL BALANCE SHEET CHANGE:  * One Time Change (Y or N): Y No. of New FTEs: 0.00 (2)	
Balance Sheet/Fund Unrestriction String(s):  FUND  SUB-DEPT ID  BAL. SHEET ACCOUNT  BAL. SHEET ACCOUNT  BAL. SHT or 499999  BAL. SHT or 499999  BAL. SHT or 499999  TOTAL BALANCE SHEET CHANGE:  * One Time Change (Y or N):  Y  No. of New FTEs:  0.00  (2)	
Balance Sheet/Fund Unrestriction String(s):  FUND  SUB-DEPT ID  BAL. SHEET ACCOUNT  BAL. SHEET ACCOUNT  BAL. SHT or 499999  BAL. SHT or 499999  BAL. SHT or 499999  TOTAL BALANCE SHEET CHANGE:  * One Time Change (Y or N):  Y  No. of New FTEs:  0.00  (2)	
Balance Sheet/Fund Unrestriction String(s):  FUND  SUB-DEPT ID  BAL. SHEET ACCOUNT  BAL. SHEET ACCOUNT  BAL. SHT or 499999  BAL. SHT or 499999  BAL. SHT or 499999  TOTAL BALANCE SHEET CHANGE:  * One Time Change (Y or N):  Y  No. of New FTEs:  0.00 (2)	
# One Time Change (Y or N): Y   No. of New FTEs: 0.00 (2)	
# One Time Change (Y or N): Y   No. of New FTEs: 0.00 (2)	
# One Time Change (Y or N): Y No. of New FTEs: 0.00 (2)	
# One Time Change (Y or N): Y No. of New FTEs: 0.00 (2)	
# One Time Change (Y or N): Y No. of New FTEs: 0.00 (2)	
* One Time Change (Y or N): Y No. of New FTEs: 0.00 (2)	
* One Time Change (Y or N): Y No. of New FTEs: 0.00 (2)	\$
If No, next year's Impact: No. of New Time Limited FTEs: 0.00 (2)	
If No, next year's Impact:  No. of New Time Limited FTEs:  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	

To accommodate additional staff requirements project is to design and remodel/construction of additional office spaces in the current CJS facility.

15,9

# **REQUEST FOR BUDGET ADJUSTMENT**

Executive Summary		
Reference No: 505000YE07	For Fiscal Year:	2017
Requesting Organization: 50500000 CAPITAL IMPROVE	EME Date of Request:	21-Sep-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:	_	

Description and Justinication:

Combine CGC bathroom projects: Combining both Government center bathroom projects into 1 project for easier project tracking and budget expense usage.

# **Fund Impact**

SUMMARY OF FUND IMPACT BY FUND				
FUND: 450 CAPITAL				
	IMPROVEMENTS FUND			
Fund Impact (Budgetary)				
Fund Impact (Transfers)				
TOTAL FUND IMPACT	\$0			

SUMMARY OF CNTY FUNDING IMPACT BY DEPT					
DEPT	REVENUE	EXPENSE	BAL SHEET	CNTY FUNDING	
5050000000 CAPITAL IMPROVEMENTS PRGM	0	(0)	0	(0)	
TOTALS	0	(0)	0	(0)	

Approvals	
Division Director:	Date: 9(21/17
Dept. or Elected Fiscal Mgr:	Date: 9-27-17
Dept. Dir. or Elected Official:	Date:
Facilities Division Director: (Capital Projects Only)	Date: 9 2 (7
Chief Financial Officer:	Date: 9/28/17
Mayor or Designee:  Approve	Date: 101417
Council Action:	Date:
Approve	

		Budg	get Adjustme	nt Detail			
jet Year:	2017	_	* Requesting D	epartment:	50500	0000 CAPITAL IMPROVEN	ENTS
et Period:	Post June Year-End	* Req Item No:	505000YE07	* Adjustment	Title:	Combine CGC bathroom pro	ojects
stment Type(s): Expense Bud	7,000	oject ~		AA Nee all			
FUND	AGENCY	SUB-DEPT ID	EXPENSE ACCOUNT	PROG/ACT I	D (OPT)	PROJECT ID (CAP)	AMOUNT
450	050	5050000000	607015 MAINTENANCE - E			FAC129C	(20.2
450	050	5050000000	607015 MAINTENANCE - E	UILDINGS		095C	20,
	<del> </del>						
-							
Davis Bud	4 C4-!(-)		TOTALE	(PENDITURE (	CHANGE:	10	
Revenue Budg		CHO DEDTIN	DEVENUE ACCOUNT	DD00/4074	D (ODT)	DD0 1507 ID (04 D)	414011017
FUND	AGENCY	SUB-DEPT ID	REVENUE ACCOUNT	PROG/ACT	D (OPT)	PROJECT ID (CAP)	AMOUNT
						·	
	-						
Ralance Sheet	VFund Unrestriction	String(e): _ Balsh		NL REVENUE (			
			eet strings only required for P if applicable.		ajosoriena		
FUND	SUE	B-DEPT ID		TACCOUNT		AMO	UNT
			BAL_SHT or 499999				
			BAL SHT or 499999				
			BAL SHT or 499999 TOTAL BALA	NCE SHEET C	CHANGE:		
* One Tir	Chance (V as N)			N 6 N -	CTC	0.00	(0)
Tone n     If No.	me Change (Y or N): , next year's impact:	ΥΥ	No. of Ne	No. of New w Time Limite		0.00	(2) (2)
	, ,			of Transferre		0. 00	(2)
				No. of Othe			(2)
Fund Balance	Transfers:						
From Fund	From Dept ID	To Fund	To Dept ID	Amou	nt		

Combining both Government center bathroom projects into 1 project for easier project tracking and budget expense usage.