

SL COUNTY BUDGET REQUEST / ADJUSTMENT FORM

Executive Summary

Reference No: 310200YE02	For Fiscal Year: 2018
Requesting Organization: 10200000 MAYOR ADMINISTRAT	Date of Request: 1-Aug-18
Budget Adjust Type(s): New Request	Ongoing (Y or N): N
	If Yes, next year's CF impact: \$0
	Net FTE Change: 0.00

Description and Justification:

Real Estate Relocation/Moving Costs: Relocation and moving expenditures relating to real estate transactions.

Fund Impact

SUMMARY OF FUND IMPACT BY FUND

FUND:	110 GENERAL FUND
Fund Impact (Budgetary)	(\$1,000,000)
Fund Impact (Transfers)	\$0
TOTAL FUND IMPACT	(\$1,000,000)

SUMMARY OF CNTY FUNDING IMPACT BY DEPT

DEPT	REVENUE	EXPENSE	BAL SHEET	CNTY FUNDING
3102000000 REAL ESTATE PRGM	0	1,000,000	0	1,000,000
TOTALS	0	1,000,000	0	1,000,000

Approvals

Division Director:



Date: 8-1-2018

Dept. or Elected Fiscal Mgr:

Date:

Dept. Dir. or Elected Official:



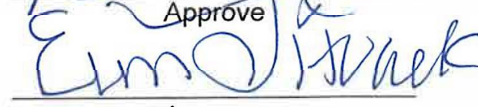
Date: 8-1-2018

Facilities Division Director:
(Capital Projects Only)



Date:

Chief Financial Officer:



Date:

Mayor or Designee:

Approve

Date:

Council Action:

Approve

Date:

Budget Adjustment Detail									
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Budget Year: 2018 * Requesting Department: 10200000 MAYOR ADMINISTRATION

Budget Period: Post June Year-End * Req Item No: 310200YE02 * Adjustment Title: Real Estate Relocation/Moving Costs

Adjustment Type(s):

Expense Budget String(s):

[illegible]

TOTAL EXPENDITURES Page 1:	\$1,000,000
TOTAL EXPENDITURES ALL PAGES:	\$1,000,000

Revenue Budget String(s):

[illegible]

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

Balance Sheet/Fund Unrestriction String(s):

☐ Bal sheet strings only required for Proprietary Fund adjustments or fund unrestrictions; check if applicable.

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

TOTAL BALANCE SHEET CHANGE:		\$0
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* Ongoing (Y or N): N
If Yes, next year's CF impact: \$0

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 Abolished FTEs:	0.00	(2)

Fund Balance Transfers:

From Fund	From Dept ID	To Fund	To Dept ID	Amount

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

Relocation and moving expenditures relating to real estate transactions.

(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.