

SL COUNTY BUDGET REQUEST / ADJUSTMENT FORM

Executive Summary

Reference No: 355000YE01	For Fiscal Year: 2018
Requesting Organization: 35500000 SALT PALACE CONV	Date of Request: 11-Sep-18
Budget Adjust Type(s): New Revenue or Expense	Ongoing (Y or N): N
Technical	If Yes, next year's CF impact: \$0
	Net FTE Change: 0.00

Description and Justification:

Additional Revenues and Expenses: Adjust 2018 budget for additional revenues from additional event activity realized so far this year. This additional event activity has resulted in additional labor expense needs. We have incurred additional labor costs for temp labor and for union labor and project additional costs through the end of the year by \$500,000. Other Costs increases include additional maintenance costs of \$50,000, Labor management system \$50,000, \$75,000 for South Plaza Study and \$35,000 for Ballroom Study. Requesting \$700,000 for new Parking management system. This system was purchased in 1999 with an upgrade in 2004. This system is no longer supported by the vendor and we are experiencing operational issues. We have been able to operate with the help of Chris Day with Traffic Solutions but we are concerned that the system may not continue functioning much longer. It is running on a windows XP operating system and the technology has run its useful life. Also requesting funds as contingency so as to not budgeted for too tight of a spending variance.

Fund Impact

SUMMARY OF FUND IMPACT BY FUND

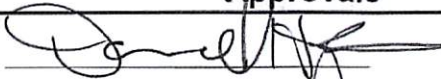
FUND:	180 RAMPTON SALT PALACE CONV CTR FUND
Fund Impact (Budgetary)	\$300,000
Fund Impact (Transfers)	\$0
TOTAL FUND IMPACT	\$300,000

SUMMARY OF CNTY FUNDING IMPACT BY DEPT

DEPT	REVENUE	EXPENSE	BAL SHEET	CNTY FUNDING
3550000000 SPCC OPERATIONS	2,000,000	1,000,000	0	(1,000,000)
3550990000 SPCC RESERVE CAPITAL PROJECTS PRGM	0	700,000	0	700,000
TOTALS	2,000,000	1,700,000	0	(300,000)

Approvals

Division Director:



Date: 9/11/2018

Dept. or Elected Fiscal Mgr:

Robert Trujillo

Digitally signed by Robert Trujillo
Date: 2018.09.17 14:16:38 -06'00'

Date: _____

Dept. Dir. or Elected Official:



Date: 9/17/18

Facilities Division Director:
(Capital Projects Only)



Date: _____

Chief Financial Officer:



Date: 9/18/18

Mayor or Designee:


Approve

Date: 9/18/18

Council Action:

Approve

Date: _____

Budget Adjustment Detail

Budget Year: 2018 * Requesting Department: 35500000 SALT PALACE CONV CTR OPS (SPCC)
 Budget Period: Post June Year-End * Req Item No: 1818000000 * Adjustment Title: Additional Revenues and Expenses
 Adjustment Type(s): Now Revenue or Expense Technical

Expense Budget String(s):

FUND	SUB-DEPT ID	EXPENSE ACCOUNT	PROG/ACT ID (OPT)	PROJECT ID (CAP)	AMOUNT
180	3550000000	639035			1,000,000.00
180	3550990000	673020		SP0116	700,000.00

TOTAL EXPENDITURES Page 1: \$1,700,000
 TOTAL EXPENDITURES ALL PAGES: \$1,700,000

Revenue Budget String(s):

FUND	SUB-DEPT ID	REVENUE ACCOUNT	PROG/ACT ID (OPT)	PROJECT ID (CAP)	AMOUNT
180	3550000000	427025			2,000,000.00

TOTAL REVENUES Page 1: \$2,000,000
 TOTAL REVENUES ALL PAGES: \$2,000,000

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

* 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.)*

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(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.