

## SL COUNTY BUDGET REQUEST / ADJUSTMENT FORM

### Executive Summary

Reference No: 310200YE04	For Fiscal Year: 2018
Requesting Organization: 31020000 REAL ESTATE	Date of Request: 28-Nov-18
Budget Adjust Type(s): Appropriation Unit Shift	Ongoing (Y or N): N
	If Yes, next year's CF impact: \$0
	Net FTE Change: 0.00

#### Description and Justification:

Appropriation Unit Shift : Request to transfer funds from Moving/Relocation account to Purchase of Land for property acquisition.

### 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: 11-28-2018
Dept. or Elected Fiscal Mgr: 	Date: 11-28-2018
Dept. Dir. or Elected Official: 	Date: 11-28-2018
Facilities Division Director: (Capital Projects Only) 	Date: _____
Chief Financial Officer: 	Date: 11-28-18
Mayor or Designee: 	Date: 11/28/18
Council Action: _____	Date: _____

Approve

Approve

Approve

Budget Adjustment Detail									
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Budget Year: 2018      \* Requesting Department: 31020000 REAL ESTATE

Budget Period: Post June Year-End \* Req Item No: 310200YE04 \* Adjustment Title: Appropriation Unit Shift

Adjustment Type(s): Appropriation Unit Shift

**Expense Budget String(s):**

[illegible]

<b>TOTAL EXPENDITURES Page 1:</b>	<b>\$0</b>
<b>TOTAL EXPENDITURES ALL PAGES:</b>	<b>\$0</b>

**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 unrestricted; check if applicable.

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

<b>TOTAL BALANCE SHEET CHANGE:</b>	<b>\$0</b>
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* Ongoing (Y or N):	N	No. of New FTEs:	0.00	(2)
If Yes, next year's CF Impact:	\$0	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:**

[illegible]

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

**Request to transfer funds from Moving/Relocation account to Purchase of Land for property acquisition.**

***(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.***