

## SL COUNTY BUDGET REQUEST / ADJUSTMENT FORM

### Executive Summary

<b>Request Item No:</b> 210000IA01	<b>For Fiscal Year:</b> 2020
<b>Requesting Organization:</b> 21000000 YOUTH SERVICES DI	<b>Date of Request:</b> 15-Jan-20
<b>Budget Adjust Type(s):</b> Technical	<b>Ongoing (Y or N):</b> Y
	<b>If Yes, next year's CF impact:</b> \$0
	<b>Net FTE Change:</b> 0.00

**Description and Justification:**

Milestone Housing Program: This budget neutral technical adjustment is to streamline the funding and expenses for Youth Services' Milestone Housing Program between Behavioral Health Services (BHS), Youth Services (YSV) and the Housing Connect. In the previous years, Youth Services received the funding from Housing Connect to fund Milestone Housing Program, funded by BHS. With this adjustment, the transactions will be streamlined and House Connect will no longer be in the middle. All parties involved have agreed to this change.

### Fund Impact

SUMMARY OF FUND IMPACT BY FUND	
<b>FUND:</b>	<b>120 GRANT PROGRAMS FUND</b>
<b>Fund Impact (Budgetary)</b>	\$0
<b>Fund Impact (Transfers)</b>	\$0
<b>TOTAL FUND IMPACT</b>	<b>\$0</b>

SUMMARY OF CNTY FUNDING IMPACT BY DEPT				
DEPT	REVENUE	EXPENSE	BAL SHEET	CNTY FUNDING
2100000800 MILESTONE TRANSITIONAL LIVING PRGM	(57,660)	25,940	0	83,600
2250000500 HOUSING	0	(83,600)	0	(83,600)
<b>TOTALS</b>	<b>(57,660)</b>	<b>(57,660)</b>	<b>0</b>	<b>0</b>

### Approvals

Division Director: _____	Date: _____
Dept. or Elected Fiscal Mgr: _____	Date: _____
Dept. Dir. or Elected Official: _____	Date: _____
Facilities Division Director: <i>(Capital Projects Only)</i> _____	Date: _____
Chief Financial Officer: _____	Date: _____
Approve	
Mayor or Designee: _____	Date: _____
Approve	
Council Action: _____	Date: _____
Approve	

# Budget Adjustment Detail

**Budget Year:** 2020      \* **Requesting Department:** 21000000 YOUTH SERVICES DIVISION  
**Budget Period:** Pre-June Interim      \* **Req Item No:** 210000A01      \* **Adjustment Title:** Milestone Housing Program  
**Adjustment Type(s):** Technical

**Expense Budget String(s):**

FUND	SUB-DEPT ID	EXPENSE ACCOUNT	PROG/ACT ID (OPT)	PROJECT ID (CAP)	AMOUNT
120	2100000800	633010			14,400
120	2100000800	621005			1,800
120	2100000800	621010			1,500
120	2100000800	607005			640
120	2100000800	601050			7,060
120	2100000800	603005			540
120	2250000500	665110			(83,600)

**TOTAL EXPENDITURES Page 1:** (\$57,660)  
**TOTAL EXPENDITURES ALL PAGES:** (\$57,660)

**Revenue Budget String(s):**

FUND	SUB-DEPT ID	REVENUE ACCOUNT	PROG/ACT ID (OPT)	PROJECT ID (CAP)	AMOUNT
120	2100000800	423000			(57,660)

**TOTAL REVENUES Page 1:** (\$57,660)  
**TOTAL REVENUES ALL PAGES:** (\$57,660)

**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

<b>*</b>	Ongoing (Y or N):	<u>Y</u>	No. of New FTEs:	<u>0.00</u> (2)
	If Yes, next year's CF impact:	<u>\$0</u>	No. of New Time Limited FTEs:	<u>0.00</u> (2)
			No. of Transferred FTEs:	<u>0.00</u> (2)
			No. of Abolished FTEs:	<u>0.00</u> (2)

**Fund Balance Transfers:**

From Fund	From Dept ID	To Fund	To Dept ID	Amount

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

This budget neutral technical adjustment is to streamline the funding and expenses for Youth Services' Milestone Housing Program between Behavioral Health Services (BHS), Youth Services (YSV) and the Housing Connect. In the previous years, Youth Services received the funding from Housing Connect to fund Milestone Housing Program, funded by BHS. With this adjustment, the transactions will be streamlined and House Connect will no longer be in the middle. All parties involved have agreed to this change.

(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.