## WEBB COUNTY REQUEST FOR BUDGET APPROPRIATION TRANSFER OR SUPPLEMENTAL BUDGET INSTRUCTIONS: ALL budget appropriation transfer and supplemental budget requests for grants and forfeitures require Auditor's Office pre-

be granted, the Department ( Agenda items will be between Requesting Department :	Webb County District Att	a real animit requesting the budget a	mendment.
Request Type (check one):	Federal Forf	——— Date of Roomsof, /	05/17/2018
_		Sidoic	
Departmental Line (Check if transfer within	Item Transfer	Supplemental Budge	et
	·	(Check if new unbudgeted n	evenue / expenditure}
ransfer From / Supplements	I Revenue:		
Account	Mnwper	Account Name	Amount
<del></del>			Amount
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ansfer To / Sumplemental Co.	<u> </u>	тс	TAL \$0.00
ansfer To / Supplemental Ex Account N	penditure Accounts:		Amount \$5,000.00 \$6,500.00
62-2260-001-461000		Account Name	Amount
62-2260-001-462605		Materials & Supplies	\$5,000.00
		Fuel & Lubricants	\$6,500.00
		_	
<del></del>			1
		TOT	AL \$11.500.00
tification for Request:		TOT	AL \$11,500.00
ds needed to purchase mater	rials and supplies and to		
tification for Request: ds needed to purchase mater ceeds available from Fund Ba	rials and supplies and to		AL \$11,500.00 Available to Appropr
ds needed to purchase mater ceeds available from Fund Ba			
ds needed to purchase mater ceeds available from Fund Ba roved by Department Signing	Authority:		
ds needed to purchase mater ceeds available from Fund Ba	Authority:		
ds needed to purchase mater ceeds available from Fund Ba roved by Department Signing	Authority:	cover fuel & lube for Investigator units.	
ds needed to purchase mater ceeds available from Fund Ba roved by Department Signing vid Sanchez - Chief Fin	Authority: ancial Officer	cover fuel & lube for Investigator units.	
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ds needed to purchase mater ceeds available from Fund Ba roved by Department Signing /id Sanchez - Chief Fin Print Name/Title	Authority: ancial Officer	cover fuel & lube for Investigator units.	
ds needed to purchase mater ceeds available from Fund Ba roved by Department Signing /id Sanchez - Chief Fin Print Name/Title	Authority: ancial Officer Kafael For Au	COVER fuel & lube for Investigator units.  Signature  Ditor's USE ONLY  Date:	
ds needed to purchase mater ceeds available from Fund Barroved by Department Signing //id Sanchez - Chief Fin Print Name/Title	Authority: ancial Officer  FOR AUT  FOR BUDGE	cover fuel & lube for Investigator units.  Signature  OUT OR'S USE ONLY	
ds needed to purchase mater ceeds available from Fund Baroved by Department Signing Vid Sanchez - Chief Fin Print Name/Title	Authority: ancial Officer  FOR AUT  FOR BUDGE	COVER fuel & lube for Investigator units.  Signature  Date:  Agenda	
ds needed to purchase mater ceeds available from Fund Barroved by Department Signing //id Sanchez - Chief Fin Print Name/Title	Authority: ancial Officer  FOR AUT  FOR BUDGE	COVER Fuel & lube for Investigator units.  Signature  Dit OR'S USE ONLY  Date:	

## WEBB COUNTY REQUEST FOR BUDGET APPROPRIATION TRANSFER OR SUPPLEMENTAL BUDGET

be granted, the Department will be notified and Auditor's Agenda items will be between Auditor's Office sponsored	omice will upload the signed form as part of the pro by the Department requesting the budget amendme	f grant award, terms Should pre-approval
Requesting Department : Webb County District Attorn	Date of Reduest: 03/17/2011	8
Request Type (check one):	righte .	
Departmental Line Item Transfer (Check if transfer within existing budget)	Supplemental Budget (Check if new unbudgeted revenue / ex	penditure)
Fransfer From / Supplemental Revenue:	_ _no.lb. 1942 No. apromosmo al como	. A. V. Junio III. III. III.
Account Number	Account Name	Amount
ansfer To / Supplemental Expenditure Accounts:  Account Number	TOTAL	\$0.00
63-2260-001-443000-075	Account Name	Amount
63-2260-001-457006	Repairs & Maintenance Vehicles  Law Enforcement - Other	\$12,500.00 (V \$23,000.00
		\$35,500.00
Stification for Request:	TOTAL _	
nds needed to cover vehicles exenditures and payments oceeds available from Fund Balance		ble to Appropriate
nds needed to cover vehicles exenditures and payments oceeds available from Fund Balance proved by Department Signing Authority:		ble to Appropriate
ands needed to cover vehicles exenditures and payments acceds available from Fund Balance  proved by Department Signing Authority:  avid Sanchez - Chief Financial Officer  Print Name/Title  FOR AUX	s to storage facilities  AV41/4	ble to Appropriate
commended by County ditor's Office:	Sto storage facilities  AV41/4  Signature  Date: 5/18	ble to Appropriate
nds needed to cover vehicles exenditures and payments occeds available from Fund Balance  proved by Department Signing Authority: avid Sanchez - Chief Financial Officer  Print Name/Title  FOR AUTHORS  ditor's Office:	S to storage facilities  AV41/4  Signature	ble to Appropriate

## WEBB COUNTY REQUEST FOR BUDGET APPROPRIATION TRANSFER OR SUPPLEMENTAL BUDGET

INS.		

ALL budget appropriation transfer and supplemental budget requests for grants and forfeitures require Auditor's Office preapproval for court agenda. Please submit the signed form to the Auditor's Office for review along with copy of grant award, terms of award, proof of receipt of additional revenue and/or other backup to support this request for our review. Should pre-approval be granted, the Department will be notified and Auditor's Office will upload the signed form as part of the proposed agenda item. Agenda items will be between Auditor's Office sponsored by the Department requesting the budget amendment.

Requesting Department:	Sheriff's Office	Date of Request: 05/16/2018	<u> </u>	
Request Type (check one):	Justice Federal to	vfeituce		
Departmental Line	Departmental Line Item Transfer (Check if transfer within existing budget)  Supplemental Budget (Check if new unbudgeted revenue / expenditure)			
Transfer From / Supplement	al Revenue: t Number	Account Name	Amarint	
Fund 2152	t Number	Account Name	Amount	
Fund 2 152			\$16,000.00	
	-	TOTAL	\$16,000.00	
Transfer To / Supplemental I	Expenditure Accounts: t Number	Account Name	Amount	
2152-3010-001-456305	Litanibei	Uniforms	\$16,000.00	
	<del> </del>	TOTAL	\$16,000.00	
Appropriation for Request: Appropriation on these funds  Approved by Department Sign  Approved by Department Sign  Print Name/file  Recommended by County  Auditor's Office:	ning Authority:	Mr Cullantes  Mittor's USE ONLY  Date: 5/18	<u> </u>	
	FOR BUDG	BET OFFICE USE ONLY		
Commissioners Court Approv	al Date:	Agenda Item :		
Date Entered by Budget Office	e:	Initials:	j	