



**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-approval 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 : Economic Development; TDA 7216115

Date of Request: 01/18/2019

Request Type (check one):

Departmental Line Item Transfer
(Check if transfer within existing budget)

Supplemental Budget
(Check if new unbudgeted revenue / expenditure)

Transfer From / Supplemental Revenue:

Account Number	Account Name	Amount
3527-1150-001-426000	Work Comp	\$700.00
TOTAL		\$700.00

Transfer To / Supplemental Expenditure Accounts:

Account Number	Account Name	Amount
3527-1150-001-421000	Insurance	\$700.00
TOTAL		\$700.00

Justification for Request:

Budget amendment to increase insurance amount is needed because there are insufficient funds in this account to be able to key in amount for October and November timesheets.

Approved by Department Signing Authority:

James E. Flores, Director

Print Name/Title

James E. Flores
Signature

FOR AUDITOR'S USE ONLY	
Recommended by County Auditor's Office: <i>[Signature]</i>	Date: <u>1/18/19</u>

FOR BUDGET OFFICE USE ONLY	
Commissioners Court Approval Date: _____	Agenda Item: _____
Date Entered by Budget Office: _____	Initials: _____