

WEBB COUNTY REQUEST FOR BUDGET APPROPRIATION TRANSFER OR SUPPLEMENTAL BUDGET

INSTRUCTIONS: ALL budget appropriation transfer and supplemental bud approval for court agenda. Please submit the signed form of award, proof of receipt of additional revenue and/or other.	to the Auditor's Office for review along with copy of er backup to support this request for our review. S	grant award, terms hould pre-approval	
be granted, the Department will be notified and Auditor's (
Agenda items will be between Auditor's Office sponsored by	y the Department requesting the budget amendmer	rt. Die zumen der Allens	
Requesting Department : Webb County District Attorne	Date of Request: 07/16/2019		
Request Type (check one):			
Departmental Line Item Transfer (Check if transfer within existing budget)	Supplemental Budget (Check if new unbudgeted revenue / exp	penditure)	
Transfer From / Supplemental Revenue:			
Account Number	Account Name	Amount	0.5. 7
2162-259700	Fund Balance Unreserved Undesignated	\$25,000.00	0.
	TOTAL	\$25,000.00	
Transfer To / Supplemental Expenditure Accounts:			
Account Number	Account Name	Amount	
2162-2260-001-455501	Drug Free Campaign	\$5,000.00	
2162-2260-001-458000	Administrative Travel	\$20,000.00	
	TOTAL	\$25,000.00	
Justification for Request: Budget Amendment needed to cover projected expenditu	res toward end of fiscal year.		
Approved by Department Signing Authority David Sanchez - Chief Financial Officer			
Print Name/Title	Signature		•
Recommended by County Auditor's Office:	Date: 7/6	19	
FOR BUOK	SET OFFICE USE ONLY Agenda		
Commissioners Court Approval Date:	Item:		
Date Entered by Budget Office:	Initials		I