



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 : CAA Self-Help Center

Date of Request: 01/17/2020

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
2530-6360-521-410000	Payroll	\$6,000.00
2530-6360-521-426000	Work Comp	\$2,000.00
TOTAL		\$8,000.00

Transfer To / Supplemental Expenditure Accounts:

Account Number	Account Name	Amount
2530-6360-521-421000	Health Life Insurance	\$8,000.00
TOTAL		\$8,000.00

Justification for Request:

This budget transfer is required in order to cover administration insurance costs through the end of the grant cycle.

Approved by Department Signing Authority:

James Flores, Director
Print Name/Title

James Flores
Signature

Recommended by County Auditor's Office:	<i>[Signature]</i>	FOR AUDITOR'S USE ONLY	Date: 1/14/20
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Commissioners Court Approval Date:		FOR BUDGET OFFICE USE ONLY	Agenda Item:
Date Entered by Budget Office:			Initials: