



**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 Date of Request: 04/20/2020

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
3522-7230-330300	Grant Revenue	\$467,270.00
TOTAL		\$467,270.00

Transfer To / Supplemental Expenditure Accounts:

Account Number	Account Name	Amount
3522-1150-001-410000	Payroll	\$38,000.00
3522-1150-001-421000	Insurance	\$2,000.00
3522-1150-001-422000	Fica	\$2,000.00
3522-1150-001-423000	Retire	\$2,000.00
3522-1150-001-425000	Unemp	\$2,000.00
3522-1150-001-426000	Work Comp	\$2,000.00
3522-1150-001-454000	Advertise	\$1,000.00
3522-1150-001-461000	Materials & Supplies	\$1,000.00
TOTAL		\$50,000.00

Justification for Request:

Carrying over balances from 2020 to 2021.
See continuation attachment on pg 2 for remainder of breakdown.

Approved by Department Signing Authority:

James E. Flores, Director
Print Name/Title

James Flores
Signature

FOR AUDITOR'S USE ONLY	
Recommended by County Auditor's Office: <u><i>Jonny Lara</i></u>	Date: <u>4/20/20</u>

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



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Requesting Department : Economic Development Date of Request: 04/20/2020

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
TOTAL		\$0.00

Transfer To / Supplemental Expenditure Accounts:

Account Number	Account Name	Amount
3522-7230-001-432001	Professional Services	\$47,270.00
3522-7230-001-470000	Capital Outlay	\$370,000.00
TOTAL		\$417,270.00

Justification for Request:

Carrying over balances from 2020-2021.

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: <u><i>James E. Flores</i></u>	Date: <u>4/20/20</u>

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