

WEBB COUNTY REQUEST FOR BUDGET APPROPRIATION TRANSFER OR SUPPLEMENTAL BUDGET

Request Type (check one):		
Departmental Line Item Transfer (Check if transfer within existing budget)	Supplemental Budget (Check if new unbudgeted revenue / expen	ditu <mark>re)</mark>
ransfer From / Supplemental Revenue:	Account Name	Amount
Account Number	Health Insurance	\$7,000.00
2661-7110-521-421000	Payroll Cost	\$5,000.00
2661-7110-521-410000	Repairs and Maintenance Building	\$1,000.00
2661-7110-521-443000-020	Payroll Cost	\$600.00
2661-7100-521-410000 2661-7100-521-458000	Administrative Travel	\$1,039.20
	TOTAL	\$14,639.20
Transfer To / Supplemental Expenditure Accoun	Account Name	Amount
2661-7110-521-441001	Telephone	\$1,000.00
	Retirement County Share	\$600.00
2661-7100-521-423000 2661-7100-521-444500	Equipment Rental	\$1,039.20
2661-7110-521-444500 2661-7110-521-413000	Overtime	\$12,000.00

FOR BUDGET OFFICE USE ONLY

Commissioners Court Approval Date:

Date Entered by Budget Office:

Agenda Item :

Initials: