



**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 : CONSTABLE PCT 2

Date of Request: 05/21/2021

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 |
|----------------|--------------|-------------------|
| 2183-259700 | FUND BALANCE | \$1,940.00 |
| | | |
| | | |
| | | |
| | | |
| | | |
| TOTAL | | \$1,940.00 |

os. 5/21/20

Transfer To / Supplemental Expenditure Accounts:

| Account Number | Account Name | Amount |
|----------------------|---------------------|-------------------|
| 2183-3180-001-461006 | CANINE EXPENDITURES | \$1,940.00 |
| | | |
| | | |
| | | |
| | | |
| | | |
| TOTAL | | \$1,940.00 |

Justification for Request:

Transfer funds to canine expenditures to purchase dog food, vet bills, and any other expenses associated with canine.

Approved by Department Signing Authority:

Ramiro Martinez, Chief Deputy

Print Name/Title

[Handwritten Signature]
Signature

Recommended by County Auditor's Office:

[Handwritten Signature]

FOR AUDITOR'S USE ONLY

Date: 5.21.21

FOR BUDGET OFFICE USE ONLY

Commissioners Court Approval Date: 06 14 21
Date Entered by Budget Office: 05/24/21

Agenda Item : Pending
Initials: EO