WEBB COUNTY REQUEST FOR BUDGET APPROPRIATION TRANSFER OR SUPPLEMENTAL BUDGET

NSTRUCTIONS: LL budget appropriation transfer and supplementa	budget requests for grants and forfeitures require	Auditor's Office pre-
proval for court agenda. Please submit the signed f	orm to the Auditor's Office for review along with copy o	f grant award, terms
award, proof of receipt of additional revenue and/o	r other backup to support this request for our review.	Should pre-approval
· · · · · · · · · · · · · · · · · · ·	or's Office will upload the signed form as part of the pro	
enda items will be between Auditor's Office sponsor	red by the Department requesting the budget amendate	nt. Krigoskopusellijosikos k
questing Department: SHERIFF'S OFFICE	Date of Request: 01/13/202	2
equest Type (check one):	Φ_{ij} .	
Departmental Line Item Transfer (Check if transfer within existing budget)	Supplemental Budget (Check if new unbedgeted revenue / ex	penditure)
ansfer From / Supplemental Revenue:		
Account Number	Account Name	Amount
08-3010-337200	Revenue from Webb	\$4,469.95
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	TOTAL	\$4,469.95
insfer To / Supplemental Expenditure Accounts:	or commence and the property of the contract of the	
Account Number	Account Name	Amount
06-3010-001-410000	Payroll	\$4,469.95
JD-3010-001-410000	rayion	\$41,400.00
		<u></u>
		\$4,469.95
	TOTAL	\$4,405.55
stification for Request:		
idget Increase to cover shortfall due to increase in s	salaries for FY 2021 (entered as nt	Dec. 31, 202
proved by Department Signing Authority:	\sim	
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heriff Martin Cuellar Jr	1. Luste	40
	Signature	· · /
Print Nama/Title		
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Print Nama/Title	R AUDITOR'S USE ONLY	,
Print Name/Title FOI acommended by County	1/-	1/2022
Print Name/Title FO	RAUDITOR'S USE ONLY Double: 1/25	1/2022
Print Name/Title FOI commended by County	1/-	1/2022
Print Name/Title FOR commended by County ditor's Office:	Date: 1/25	1/2022
Print Name/Title FOI commended by County ditor's Office: FOR E	Date: 1/2 C	1/2022
Print Nama/Title FOI ecommended by County uditor's Office:	Date: 1/25	1/2022