

## 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 preapproval 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 : Sheriff's Office                                       | Date of Request: 07/06/202                                 | 2  |
|--|--|--|
| Request Type (check one):  |  |  |
| Departmental Line Item Transfer (Check if transfer within existing budget)     | Supplemental Budget (Check if new unbudgeted revenue / exp | nenditure)   |
|  |  | Shunter of   |
| Transfer From / Supplemental Revenue:  |  | a de producera de la composition de la |
| Account Number   | Account Name   | Amount   |
| 2906-3010-330300   | Grant Revenue  | \$21,667.10  |
|  |  |  |
|  | TOTAL  | \$21,667.10  |
| TfTo / Sumplemental Evpanditure Accounts                                       | •  |  |
| Transfer To / Supplemental Expenditure Accounts Account Number                 | Account Name   | Amount   |
| 2906-3010-001-413000   | Overtime   | \$16,667.00  |
| 2906-3010-001-422000   | FICA   | \$1,275.03   |
| 2906-3010-001-423000   | Retirement   | \$3,128.40   |
| 2906-3010-001-425000   | Unemployment   | \$96.67  |
| 2906-3010-001-426000   | Worker's Compensation                                      | \$500.00   |
|  | TOTAL  | \$21,667.10  |
| Justification for Request: Supplmental funding was provided for this grant for |  |  |
| Approved by Department Signing Authority:                                      | m a Ony  | _  |
| Martin Cuellar, Webb Co. Sheriff  Print Name/Title                             | MI, Was 45   |  |
| Print Name/Title   |  | 12023  |
| Print Name/Title  Recommended by County Auditor's Office:                      | OR AUDITOR'S USE ONLY  Date: 7/11                          | <u> 20</u> 25  |
| Print Name/Title  Recommended by County Auditor's Office:                      | OR AUDITOR'S USE ONLY  Date: 111                           | <u> 20</u> 25  |