

WEBB COUNTY REQUEST FOR BUDGET APPROPRIATION TRANSFER OR SUPPLEMENTAL BUDGET

	UC		

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.

	onsored by the Department requesting the budget amendmen	t. Ngganatan
Requesting Department : Head Start	Date of Request: 09/27/202	2
Request Type (check one):		
Departmental Line Item Transfer (Check if transfer within existing budget)	Supplemental Budget (Check if new unbudgeted revenue / exp.	enditure)
ransfer From / Supplemental Revenue:		
Account Number	Account Name	Amount
357-5190-531-458060	In-Town Mileage	\$3,896.00
	TOTAL	\$3,896.00
ransfer To / Supplemental Expenditure Accou Account Number	nts: Account Name	Amount
357-5190-531-457008	Contractual	\$3,896.00
	TOTAL	\$3,896.00
Justification for Request: ransfer will allow funds to pay for ChildPlus Soft	ware	
approved by Department Signing Authority:		\sim
Aliza F. Oliveros		X)
Print Name/Title	Signature	1
ecommended by County uditor's Office:	FOR AUDITOR'S USE ONLY Record Date: 9-2	1-22
	OR BUDGET OFFICE USE ONLY Agenda	
Commissioners Court Approval Date:	(tem:	
Date Entered by Budget Office:	Initials:	