

## 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: 01/24/2023	3
Request Type (check one):  Departmental Line Item Transfer (Check if transfer within existing budget)	Supplemental Budget (Check if new unbudgeted revenue / exp	penditure)
Transfer From / Supplemental Revenue:		
Account Number	Account Name	Amount
2608-3010-001-410000	Salary	\$48,841.00
2608-3010-001-421000	Health Insurance	\$9,593.99
2608-3010-001-422000	FICA	\$3,692.20
2608-3010-001-423000	Retirement	\$6,333.03
2608-3010-001-425000	Unemployment	\$279.94
2608-3010-001-426000	Worker's Comp.	\$1,495.48
	TOTAL	\$70,235.64
Fransfer To / Supplemental Expenditure Accounts Account Number	Account Name	A
2608-3010-001-458000	Admin. Travel	Amount
2608-3010-001-470000	Capital Outlay	\$5,418.00
2608-3010-001-470000	Materials & Supplies	\$64,148.00 \$669.64
	TOTAL	\$70,235.64
Justification for Request: Needed training, supplies, minor tools, and equipme Jnit	ent to enhance the ability of the Webb County Sheriff's O	ffice Interdiction
Approved by Department Signing Authority: Sheriff Martin Cuellar  Print Name/Title	M. Culler ?	
Recommended by County Auditor's Office:	or Auditor's use only  1 Innandly Date: 1/24	123
FOR  Commissioners Court Approval Date:  Date Entered by Budget Office:	BUDGET OFFICE USE ONLY  Agenda  Item:	