



**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 : 406th Grants - Veterans Treatment Court Date of Request: 03/27/2023

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 |
|----------------------|-----------------------|-------------------|
| 2872-2040-001-410000 | Payroll | \$4,136.00 |
| 2872-2040-001-422000 | FICA | \$1,018.22 |
| 2872-2040-001-423000 | Retirement | \$618.67 |
| 2872-2040-001-426000 | Workers Compensation | \$1.97 |
| 2872-2040-001-425000 | Unemployment | \$99.95 |
| 2872-2040-001-458000 | Administrative Travel | \$750.00 |
| 2872-2040-001-460000 | Office Supplies | \$500.00 |
| 2872-2040-001-462605 | Indirect Funds (Fuel) | \$325.00 |
| TOTAL | | \$7,449.81 |

Transfer To / Supplemental Expenditure Accounts:

| Account Number | Account Name | Amount |
|----------------------|------------------|-------------------|
| 2872-2040-001-421000 | Health Insurance | \$7,449.81 |
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| TOTAL | | \$7,449.81 |

Justification for Request:

Grants funds used to cover employee opting in to employer provided health insurance and cover increase provided by employer. No impact to general fund all funds used are grant funds and have been approved by granting agency.

Approved by Department Signing Authority:

Oscar J. Hale, Jr./ 406th Judicial District Judge

Print Name/Title

Signature

| FOR AUDITOR'S USE ONLY | |
|---|----------------------|
| Recommended by County Auditor's Office: | Date: <u>4/18/23</u> |

| FOR BUDGET OFFICE USE ONLY | |
|--|---------------------|
| Commissioners Court Approval Date: _____ | Agenda Item : _____ |
| Date Entered by Budget Office: _____ | Initials: _____ |