

## **WEBB COUNTY** REQUEST FOR BUDGET APPROPRIATION TRANSFER OR SUPPLEMENTAL BUDGET

INST		

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

Requesting Department : SHERIFF'S C	DFFICE Date of Request: 07/18/2023			
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		
2150-3010-001-456320	Bullet Proof Vests	\$500.00		
		NAME AND ADDRESS OF THE PARTY O		
	TOTAL L	\$500.00		
Fransfer To / Supplemental Expenditure Ad	The state of the s			
Account Number 2150-3010-001-426000	Account Name Workers Comp	Amount		
2130-3010-001-420000	vvoikers comp	\$500.00		
	TOTAL	\$500.00		
1 - 100 - 11 - 11 - 12 - 10 - 11 - 11	TOTAL L	Ψ000.00		
Justification for Request: _ine Item Transfer is to cover fringe benefit :	from overtime worked under the following: USM, ICE, OCDETF, 8	& LBSP for		
iscal year 2023				
Approved by Department Signing Authority:		SANGALOSA POR SANGA SANGA		
Sheriff Martin Cuellar Jr	M(1. (1)			
Print Name/Title	Signature			
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Recommended by County	FOR AUDITOR'S USE ONLY			
Auditor's Office:	u Salcado Date: 7/65	123		
	FOR BUDGET OFFICE USE ONLY			
Commissioners Court Approval Date:	Agenda Litem:	Agenda Item :		
Date Entered by Budget Office:	Initials:			