

## 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 : CAA- Meals On Wheels		Date of Reques	: 01/18/2024	
Request Type (check one):  Departmental Line	Item Transfer	Supplemental B	udget	
(Check if transfer within		(Check if new unbudg		enditure)
Transfer From / Supplement	al Revenue:			
Account Number		Account Name		Amount
2371-5260-521-410000		Payroll Cost		\$30,000.00
2371-5260-521-421000		Health Life Insurance		\$5,000.00
2371-5260-521-423000		Retirement County Share		\$5,000.00
			TOTAL	\$40,000.00
Transfer To / Supplemental		Account Name		Amount
2371-5260-521-463030	t Number	Bulk Food		\$40,000.00
			TOTAL	\$40,000.00
Justification for Request: Funds will help cover there the	ne cost of food for the rest of	the Fiscal Year		
Approved by Department Sig			Signature	
Recommended by County Auditor's Office:	Antonio Berr	JDITOR'S USE ONLY  Lal Jr. Date:	_01/18/	2024
		GET OFFICE USE ONLY Agen		
Commissioners Court Approv		ltem .		
Date Entered by Budget Office	ee:	Initia	s:	