



Nueces County, Texas Budget Transfer Form

The Honorable Commissioner's Court:

Please approve the following budget transfer request for:

Department No. 1125 Department Name: Risk Management

(Please prepare a separate request for each department)

| Key Code | Account Name | <u>Increase</u> | <u>Decrease</u> |
|----------|----------------------|-----------------|-----------------|
| 5123 | Salaries - Regular | | 3,207.00 |
| 5125 | Salaries - Overtime | 49.00 | |
| 5126 | Salaries - Temporary | 3,158.00 | |
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| | | | |
| TOTALS | | <u>3,207.00</u> | <u>3,207.00</u> |

This budget transfer is necessary to:

To cover cost of temporary when the risk management specialist position was vacant

Contact Person: Lisa Davis, Budget Accountant *LD*

Telephone No: EXT 0558

Timothy E. Everett
Signature of Official/Dept. Head

2/8/18
Date

Recommended by:

Lisa Davis, Budget Accountant *LD* 2/8/18
County Auditors Office Date

Budget Change Order BCO09

Notification of Commissioners Court Action:

Approved by the Commissioner's Court on _____
 Revised & Approved by the Commissioner's Court on _____
 Disapproved by the Commissioner's Court on _____

County Auditors Office _____ Date _____

Calculation of Available Personnel Costs Form

(Please attach this form to the Budget Transfer Form with a computer printout.)



1125
Dept No.

Risk Management
Dept Name

Calculation of Available Salaries

As of 2/9/2018 Available Budget Balance-Salaries \$ 86,728
 (Per Account Summary or GLIQBA Reports)

| | | | | |
|-----------|--|---|--|---|
| Bi-weekly | <u>17.5</u> (Pay Periods Remaining) | X | <u>4,248.00</u> (Amount per Pay Period) | |
| | | | | Projected Salaries Needed (<u>74,340</u>) |
| | | | | Funds Available <u>12,388</u> |
| | | | | Budget Amendment Transfers-out requested <u>(3,207)</u> |
| | | | | Funds available after transfer \$ <u>9,181</u> |

Calculation of Available Employee Benefits

As of _____ Available Budget Balance-Benefits \$ _____
 (Per Account Summary or GLIQBA Reports)

| | | | | |
|-----------|----------------------------------|---|----------------------------------|--|
| Bi-weekly | _____ (Pay Periods Remaining) | X | _____ (Amount per Pay Period) | |
| | | | | Projected Benefits Needed (<u>0</u>) |
| | | | | Funds Available <u>0</u> |
| | | | | Budget Amendment Transfers-out requested _____ |
| | | | | Funds available after transfer \$ <u>0</u> |

[Signature] 2/8/18
 Prepared By Date

[Signature] _____
 Approver Signature Date

[Signature] _____
 CCT Administration Approval Date



Nueces County, Texas Budget Transfer Form

The Honorable Commissioner's Court:

Please approve the following budget transfer request for:

Department No. 1250 Department Name: County Auditor
 (Please prepare a separate request for each department)

| Key Code | Account Name | <u>Increase</u> | <u>Decrease</u> |
|----------|----------------------|-----------------|-----------------|
| 5126 | Salaries - Temporary | 2,300.00 | |
| 5510 | Other Expenses | | 2,300.00 |
| | | | |
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| TOTALS | | <u>2,300.00</u> | <u>2,300.00</u> |

This budget transfer is necessary to:
Temporary Internal Auditor (non-certified) to assist internal audit department

Contact Person: Lisa Davis, Budget Accountant Telephone No: 0558

[Signature] _____ Date _____
 Signature of Official/Dept. Head

Recommended by: Lisa Davis, Budget Accountant _____ Budget Change Order: BCO 09
County Auditors Office _____ Date 2/20/2018

Notification of Commissioners Court Action:

Approved by the Commissioner's Court on _____

Revised & Approved by the Commissioner's Court on _____

Disapproved by the Commissioner's Court on _____

County Auditors Office Date



Nueces County, Texas
Budget Transfer Form

RECEIVED

FEB 20 2018

NUECES COUNTY AUDITORS

The Honorable Commissioner's Court:

Please approve the following budget transfer request for:

Department No. 3300 Department Name: Court Administration
(Please prepare a separate request for each department)

Table with 4 columns: Key Code, Account Name, Increase, Decrease. Rows include 5300 Professional Services, 5240 MTR - Equipment, 5540 Travel, and a TOTALS row.

This budget transfer is necessary to:
Cover budget shortfall

Contact Person: Marilee Roberts Telephone No: 888-0789

Signature of Official/Dept. Head: Marilee Roberts Date: 2/20/18

Recommended by: [Signature] Date: 2/20/18 Budget Change Order: BC009

Notification of Commissioners Court Action:

Approved by the Commissioner's Court on
Revised & Approved by the Commissioner's Court on
Disapproved by the Commissioner's Court on

County Auditors Office Date



Nueces County, Texas Budget Transfer Form

The Honorable Commissioner's Court:

Please approve the following budget transfer request for:

Department No. 3330 Department Name: 105th District Court
(Please prepare a separate request for each department)

| Key Code | Account Name | <u>Increase</u> | <u>Decrease</u> |
|----------|---------------------------|-----------------|-----------------|
| 5210 | Office Expense & Supplies | | 230.00 |
| 5540 | Travel | 230.00 | |
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| | TOTALS | <u>230.00</u> | <u>230.00</u> |

This budget transfer is necessary to:

Cover costs for Travel to TX Marshall's Association in Marble Falls, TX on 04/08/18-04/12/18

Contact Person: Lisa Davis, Budget Accountant *LD* Telephone No: EXT 0558

[Signature] Signature of Official/Dept. Head Date _____

Recommended by: Lisa Davis, Budget Accountant *LD* Date 2/8/2018 Budget Change Order BCO09
County Auditors Office

Notification of Commissioners Court Action:

Approved by the Commissioner's Court on _____
Revised & Approved by the Commissioner's Court on _____
Disapproved by the Commissioner's Court on _____

County Auditors Office _____ Date _____