

Budget Amendment Request Form

For Budget Office Use Only	
_____ Court	_____ Non-Court
FY _____	Seq. No. _____
Approved by: _____ Date: _____	

Date of Request: October 10, 2017

From: Auditor's Office/Jeff May
(Department Name / Contact Name / Phone)

Budget Account to Receive Budget Amendment: _____ New Existing

Project Code to Receive Amendment: New _____ Existing

TO Account Information:

Line Item Number	Line Item Description	Project Code	Amount
<u>001-2501-440.64-13</u>	<u>MEDIATOR COSTS</u>		<u>\$75,000.00</u>
TO Total:			\$75,000.00

FROM Account Information:

Line Item Number	Line Item Description	Project Code	Amount
<u>001-2501-440.40-12</u>	<u>TEMPORARY FULL TIME</u>		<u>\$50,000.00</u>
<u>001-2501-440.40-10</u>	<u>REGULAR FULL TIME</u>		<u>\$25,000.00</u>
FROM Total:			\$75,000.00

Purpose for Request:

Request approval of budget amendment in the amount of \$75,000 for the District Court Shared. There are currently 14 checks to pay Substitute Court Reporters in the amount of \$20,674.68 being held due to the category budget being negative in the amount of \$56,185.83. The Mediator Costs account original budget is for \$100,000 but the actual cost as of 10/10/2017 is \$207,413.70 which is causing the negative budget.

