

# REQUEST FOR LEGISLATIVE ACTION

Completed by County Counselor's Office:

Res/~~Ord~~ No.: 19341

Sponsor(s): Alfred Jordan

Date: December 5, 2016

<p>SUBJECT</p>	<p>Action Requested  <input checked="" type="checkbox"/> Resolution  <input type="checkbox"/> Ordinance</p> <p>Project/Title: Requesting a \$25,000 increase to the contract agreement with Palestine Senior Citizen's Activity Center which was previously authorized \$90,000 per Resolution 19043 on January 19, 2016. This \$25,000 increase will require a transfer of funds from the Non-Departmental Health Fund Outside Agency Funding.</p>										
<p>BUDGET INFORMATION  <i>To be completed                  By Requesting                  Department and                  Finance</i></p>	<table border="1" data-bbox="315 667 1292 953"> <tr> <td>Amount authorized by this legislation this fiscal year:</td> <td>\$25,000</td> </tr> <tr> <td>Amount previously authorized this fiscal year:</td> <td>\$90,000</td> </tr> <tr> <td>Total amount authorized after this legislative action:</td> <td>\$115,000</td> </tr> <tr> <td>Amount budgeted for this item * (including transfers):</td> <td>\$115,000</td> </tr> <tr> <td>Source of funding (name of fund) and account code number; FROM/TO:                      Health Fund/non-departmental/outside agency                      Health Fund/Palestine Sr/outside agency</td> <td><b>HEALTH FUND</b>  <b>FROM:</b>  <b>002-5102-56789</b>  <b>TO:</b>  <b>002-7731-56789</b></td> </tr> </table> <p>* If account includes additional funds for other expenses, total budgeted in the account is: \$</p> <p>OTHER FINANCIAL INFORMATION:</p> <p><input type="checkbox"/> No budget impact (no fiscal note required)  <input type="checkbox"/> Term and Supply Contract (funds approved in the annual budget); estimated value and use of contract:                  Department: Estimated Use: \$</p> <p>Prior Year Budget (if applicable):                  Prior Year Actual Amount Spent (if applicable):</p>	Amount authorized by this legislation this fiscal year:	\$25,000	Amount previously authorized this fiscal year:	\$90,000	Total amount authorized after this legislative action:	\$115,000	Amount budgeted for this item * (including transfers):	\$115,000	Source of funding (name of fund) and account code number; FROM/TO: Health Fund/non-departmental/outside agency Health Fund/Palestine Sr/outside agency	<b>HEALTH FUND</b> <b>FROM:</b> <b>002-5102-56789</b> <b>TO:</b> <b>002-7731-56789</b>
Amount authorized by this legislation this fiscal year:	\$25,000										
Amount previously authorized this fiscal year:	\$90,000										
Total amount authorized after this legislative action:	\$115,000										
Amount budgeted for this item * (including transfers):	\$115,000										
Source of funding (name of fund) and account code number; FROM/TO: Health Fund/non-departmental/outside agency Health Fund/Palestine Sr/outside agency	<b>HEALTH FUND</b> <b>FROM:</b> <b>002-5102-56789</b> <b>TO:</b> <b>002-7731-56789</b>										
<p>PRIOR LEGISLATION</p>	<p>Prior ordinances and (date):                  Prior resolutions and (date): Resolution # 19043 1/19/2016</p>										
<p>CONTACT INFORMATION</p>	<p>RLA drafted by (name, title, &amp; phone): Cindy Wallace – Audit Assistant 881-3312</p>										
<p>REQUEST SUMMARY</p>	<p>Requesting a transfer of funds from the Non-Departmental Health Fund Outside Agency Funding and increase to the agreement with Palestine Senior Citizen's Activity Center for the Life Enrichment Forever Fit Program.</p>										
<p>CLEARANCE</p>	<p><input type="checkbox"/> Tax Clearance Completed (Purchasing &amp; Department)  <input type="checkbox"/> Business License Verified (Purchasing &amp; Department)  <input type="checkbox"/> Chapter 6 Compliance - Affirmative Action/Prevailing Wage (County Auditor's Office)</p>										
<p>ATTACHMENTS</p>	<p>Budget page</p>										
<p>REVIEW</p>	<table border="1" data-bbox="315 1709 1247 1961"> <tr> <td>Department Director: <i>Cathy Woodersa</i></td> <td>Date: <i>12/2/2016</i></td> </tr> <tr> <td>Finance (Budget Approval): <i>If applicable</i> <i>Mary Rasmussen</i></td> <td>Date: <i>12/5/16</i></td> </tr> <tr> <td>Division Manager: <i>Mary Jane Brown</i></td> <td>Date: <i>12/5/16</i></td> </tr> <tr> <td>County Counselor's Office:</td> <td>Date:</td> </tr> </table>	Department Director: <i>Cathy Woodersa</i>	Date: <i>12/2/2016</i>	Finance (Budget Approval): <i>If applicable</i> <i>Mary Rasmussen</i>	Date: <i>12/5/16</i>	Division Manager: <i>Mary Jane Brown</i>	Date: <i>12/5/16</i>	County Counselor's Office:	Date:		
Department Director: <i>Cathy Woodersa</i>	Date: <i>12/2/2016</i>										
Finance (Budget Approval): <i>If applicable</i> <i>Mary Rasmussen</i>	Date: <i>12/5/16</i>										
Division Manager: <i>Mary Jane Brown</i>	Date: <i>12/5/16</i>										
County Counselor's Office:	Date:										

Fiscal Information (to be verified by Budget Office in Finance Department)

- This expenditure was included in the annual budget.
- Funds for this were encumbered from the \_\_\_\_\_ Fund in \_\_\_\_\_.
- There is a balance otherwise unencumbered to the credit of the appropriation to which the expenditure is chargeable and there is a cash balance otherwise unencumbered in the treasury to the credit of the fund from which payment is to be made each sufficient to provide for the obligation herein authorized.
- Funds sufficient for this expenditure will be/were appropriated by Ordinance # \_\_\_\_\_
- Funds sufficient for this appropriation are available from the source indicated below.

Account Number:	Account Title:	Amount Not to Exceed:

- This award is made on a need basis and does not obligate Jackson County to pay any specific amount. The availability of funds for specific purchases will, of necessity, be determined as each using agency places its order.
- This legislative action does not impact the County financially and does not require Finance/Budget approval.



December 2, 2016

Jackson County Legislature  
415 E 12<sup>th</sup> Street  
Kansas City, MO 64106

RE: Need of Additional Funds for Socialization

Palestine Senior Citizen Activity Center (PSCAC) is in need of an additional \$25,000 to provide additional socialization programs for senior adults. PSCAC provides weekly classes to encourage socialization. PSCAC contracts with a fitness instructor to provide aerobics classes twice a week and a computer instructor to conduct computer classes once a week. In addition, PSCAC provides weekly projects in the Arts & Crafts room.

PSCAC has 650 members who are under-served, low-income and living below the national poverty level. PSCAC serves over 150 senior adults daily with an array of programs and services. Our members count on PSCAC to aid in the prevention of isolation, loneliness, and to help them maintain living independently in their own homes.

Should you have any questions, feel free to contact me, Lori Smith, Executive Director personally.

Thank you for your continued support of PSCAC and our senior adults.

Respectfully submitted,

Lori Smith, MBA  
Executive Director, PSCAC



## Section B 2016 Program AMENDED Budget Request

Agency Name:

Replaces Previous Budget Dated:

Date of AMENDED  
Budget Request:

Palestine Sr. Citizen Acti

Jan. 4, 2016

12/2/2016

### Salaries

*attach job description or duties for NEW Program requests only*

Position / Title	Budgeted Amount as of: 1/8/2016	100% Funded by Jackson County	New Amount Amended Request
Executive Director	32500	<input type="checkbox"/>	32500
Administrative Assistant	23920	<input type="checkbox"/>	23920
Receptionist	14860	<input type="checkbox"/>	14860
Janitor	18720	<input type="checkbox"/>	18720
		<input type="checkbox"/>	
		<input type="checkbox"/>	
Fringe Benefits			
<b>Total Salaries &amp; Fringe Benefits</b>	<b>90000</b>		<b>90000</b>

### Contractual Services & Supplies

Description	Budgeted Amount as of: 1/8/2016	100% Funded by Jackson County	New Amount Amended Request
Class Instructors		<input type="checkbox"/>	18,000
Supplies		<input type="checkbox"/>	7,000
		<input type="checkbox"/>	
		<input type="checkbox"/>	
		<input type="checkbox"/>	
		<input type="checkbox"/>	
		<input type="checkbox"/>	
		<input type="checkbox"/>	
		<input type="checkbox"/>	
		<input type="checkbox"/>	
		<input type="checkbox"/>	
<b>Total Contractual Services &amp; Supplies</b>	<b>0</b>		<b>25,000</b>
<b>Total 2016 Program Budget Request</b>	<b>90000</b>		<b>115,000</b>

Total Program Cost	0
<i>Total cost to run your program regardless of the Jackson County funding you are requesting.</i>	
Estimate of Cost Per Participant	0

**Fiscal Note:  
Jackson County, Missouri**

Funds sufficient for this transfer are available from the sources indicated below.

Date: December 5, 2016 PC# \_\_\_\_\_ RES # 19341 \_\_\_\_\_

Department / Division	Character/Description	From	To
<b>Health Fund - 002</b>			
5102 - NonDepartmental	56789 - Outside Agency Funding	\$ 25,000	\$ -
7731 - Palestine Senior Citizens	56789 - Outside Agency Funding		25,000
		\$ 25,000	\$ 25,000

*Mary Rasmussen*  
Budgeting