

REQUEST FOR LEGISLATIVE ACTION

Completed by County Counselor's Office:

Resolution No.: 19656

Sponsor(s): Dan Tarwater III

Date: November 20, 2017

<p>SUBJECT</p>	<p>Action Requested <input checked="" type="checkbox"/> Resolution <input type="checkbox"/> Ordinance</p> <p>Project/Title: Requesting an Ordinance, transferring \$10,326.00 within the Anti-Drug sale tax fund to cover the costs of vacation and sick leave payouts for a long time employee that is retiring.</p>																		
<p>BUDGET INFORMATION <i>To be completed By Requesting Department and Finance</i></p>	<table border="1"> <tr> <td>Amount authorized by this legislation this fiscal year:</td> <td>\$10,326.00</td> </tr> <tr> <td>Amount previously authorized this fiscal year:</td> <td>\$</td> </tr> <tr> <td>Total amount authorized after this legislative action:</td> <td>\$10,326.00</td> </tr> <tr> <td>Amount budgeted for this item * (including transfers):</td> <td>\$</td> </tr> <tr> <td>Source of funding (name of fund) and account code number; FROM / TO</td> <td>FROM ACCT \$10326.00</td> </tr> <tr> <td>From: 008-4401-55010</td> <td>TO ACCT</td> </tr> <tr> <td>To: 008-4401-55130</td> <td>\$6,498.00</td> </tr> <tr> <td>From: 008-4401-55010</td> <td></td> </tr> <tr> <td>To: 008-4401-55140</td> <td>\$3,828.00</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:	\$10,326.00	Amount previously authorized this fiscal year:	\$	Total amount authorized after this legislative action:	\$10,326.00	Amount budgeted for this item * (including transfers):	\$	Source of funding (name of fund) and account code number; FROM / TO	FROM ACCT \$10326.00	From: 008-4401-55010	TO ACCT	To: 008-4401-55130	\$6,498.00	From: 008-4401-55010		To: 008-4401-55140	\$3,828.00
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<p>PRIOR LEGISLATION</p>	<p>Prior ordinances and (date):</p> <p>Prior resolutions and (date):</p>																		
<p>CONTACT INFORMATION</p>	<p>RLA drafted by (name, title, & phone): Carol Lillis, COMBAT Office Administrator, 881-1415</p>																		
<p>REQUEST SUMMARY</p>	<p>Requesting an Ordinance, transferring \$10,326.00 within the Anti-Drug sales tax fund to cover the costs of vacation and sick leave payout for a long term employee within COMBAT administration that is retiring. The transfer within the Anti-Drug sales tax fund is needed to cover the cost of the vacation and sick leave payouts.</p>																		
<p>CLEARANCE</p>	<p><input type="checkbox"/> Tax Clearance Completed (Purchasing & Department) <input type="checkbox"/> Business License Verified (Purchasing & Department) <input type="checkbox"/> Chapter 6 Compliance - Affirmative Action/Prevailing Wage (County Auditor's Office)</p>																		
<p>ATTACHMENTS</p>																			

REVIEW	Department Director: <i>[Signature]</i>	Date: 11/14/2017
	Finance (Budget Approval): <i>If applicable</i> <i>Marg Rasmussen</i>	Date: 4/4/17
	Division Manager: <i>[Signature]</i>	Date: 11-15-17
	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.

