

REQUEST FOR LEGISLATIVE ACTION




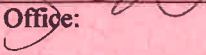
Completed by County Counselor's Office:

Res/Ord No.: 497.4

Sponsor(s): Greg Grounds

Date: April 24, 2017

<p>SUBJECT</p>	<p>Action Requested <input type="checkbox"/> Resolution <input checked="" type="checkbox"/> Ordinance</p> <p>Appropriating \$1488.50 from the undesignated fund in acceptance of insurance proceeds for the repair of a vehicle for the use of the Environmental Health Division in the Public Works Department.</p>										
<p>BUDGET INFORMATION <i>To be completed By Requesting Department and Finance</i></p>	<table border="1" data-bbox="315 541 1198 856"> <tr> <td>Amount authorized by this legislation this fiscal year:</td> <td>1488.50\$</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>1488.50</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 004-9999-47040 TO ACCT 002-1503-56530</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:	1488.50\$	Amount previously authorized this fiscal year:	\$	Total amount authorized after this legislative action:	1488.50	Amount budgeted for this item * (including transfers):	\$	Source of funding (name of fund) and account code number; FROM / TO	FROM ACCT 004-9999-47040 TO ACCT 002-1503-56530
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<p>PRIOR LEGISLATION</p>	<p>Prior ordinances and (date): Prior resolutions and (date):</p>										
<p>CONTACT INFORMATION</p>	<p>RLA drafted by (name, title, & phone):</p>										
<p>REQUEST SUMMARY</p>	<p>Requesting \$1488.50 to be transferred from 004-9999-47040, Increase Revenues, to account 002-1503-56530, Maintenance and Auto Repair, repair hail damage to a 2017 Ford Escape. The county received a payment from MOPERM representing the cost of an Environmental Health fleet vehicle damaged as a result of storms on March 7, 2017 dated April 5, 2017 for 1488.50.</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>										

ATTACHMENTS		
REVIEW	Department Director: Brian Gaddie, PE 	Date: 4/10/17
	Finance (Budget Approval): If applicable 	Date: 4/14/17
	Division Manager: 	Date: 4/18/17
	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:
004-9999-47040	Increase Revenues	\$1488.50

- 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.


Supplemental Appropriation Request
Jackson County, Missouri

Funds sufficient for this appropriation are available from the source indicated below.

Date: April 14, 2017

ORD # 4974

<u>Department / Division</u>	<u>Character/Description</u>	<u>From</u>	<u>To</u>
Health Fund - 002			
9999	47040 - Reimburs. Damage Claims	\$ 1,488	
9999	2810 - Undesignated Fund Balance		1,488
9999	2810 - Undesignated Fund Balance	1,488	
1503 - Environmental Health	56530 - Maintenance & Repair - Auto		1,488

 4/14/17
Budget Office

Ord. 4974

20369

04/05/2017



Central Bank

P.O. Box 779
Jefferson City, Missouri 65102
80-63/865



Missouri Public Entity Risk Management Fund

3425 Constitution Ct., 3rd Floor
P.O. Box 7110
Jefferson City, MO 65102-7110

PAY TO THE ORDER OF ONE THOUSAND FOUR HUNDRED EIGHTY-EIGHT AND 50 / 100

\$ 1,488.50

DOLLARS

COUNTY OF JACKSON
415 E 12TH 2ND FLOOR
KANSAS CITY MO 64106

Void After 90 Days

TWO SIGNATURES REQUIRED

Brenda L. Gibson
AUTHORIZED SIGNATURE

MEMO Claim Payments

⑈020369⑈ ⑆086500634⑆ ⑈10 1799 3⑈

MOPERM

04/05/2017

20369

Claim Number	Claimant	Member Name	Description	Amount
AP17-0040855-1	COUNTY OF JACKSON	COUNTY OF JACKSON	2017 Ford Escape Vln 54538 (hall damage repairs)	\$2,488.50
AP17-0040855-1	COUNTY OF JACKSON	COUNTY OF JACKSON	Deductible Applied	-\$1,000.00
			Total	\$1,488.50

Security features. Details on back.