

**REQUEST FOR LEGISLATIVE ACTION**

Completed by County Counselor's Office:  
 Res/~~Ord~~ No.: 18356  
 Sponsor(s): Dennis Waits  
 Date: January 6, 2014

SUBJECT	Action Requested <input checked="" type="checkbox"/> Resolution <input type="checkbox"/> Ordinance  Project/Title: <b><u>2014 Outside Agency Funding Request Adopted By The Legislature Per Outside Agency Funding Proposal: Need For Agenda Of January 6, 2014</u></b>										
BUDGET INFORMATION <i>To be completed By Requesting Department and Finance</i>	<table border="1" data-bbox="316 562 1291 781"> <tr> <td>Amount authorized by this legislation this fiscal year:</td> <td>\$236,275</td> </tr> <tr> <td>Amount previously authorized this fiscal year:</td> <td>\$0</td> </tr> <tr> <td>Total amount authorized after this legislative action:</td> <td>\$236,275</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><b>Health &amp; Park Funds 002-8001-6789 &amp; 003-8001-6789</b></td> </tr> </table> <p>* If account includes additional funds for other expenses, total budgeted in the account is: \$</p> OTHER FINANCIAL INFORMATION <input type="checkbox"/> No budget impact (no fiscal note required) <input type="checkbox"/> Term and Supply Contract (funds approved in annual budget); estimated value and use of contract: Department: Estimated Use: \$ Prior Year Budget (if applicable): Prior Year Actual Amount Spent (if applicable):	Amount authorized by this legislation this fiscal year:	\$236,275	Amount previously authorized this fiscal year:	\$0	Total amount authorized after this legislative action:	\$236,275	Amount budgeted for this item *(including transfers):	\$	Source of funding (name of fund) and account code number; FROM/TO	<b>Health &amp; Park Funds 002-8001-6789 &amp; 003-8001-6789</b>
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PRIOR LEGISLATION	Prior ordinances and (date): Prior resolutions and (date): Resolution # 18060 1/7/2013										
CONTACT INFORMATION	RLA drafted by (name, title, & phone): Cindy Wallace – Audit Assistant 881-3312										
REQUEST SUMMARY	<p><b>Please draft the below agency contract. Request should be drafted and held by the Counselor's Office while awaiting compliance with Executive Order 04-18.</b></p> <p>1). University of Missouri Extension Council – Jackson County          \$96,313 002-8001-6789</p> <p>2). University of Missouri Extension Council – Jackson County          \$139,962 003-8001-6789</p> <p style="text-align: center;"><b>Total = \$236,275</b></p>										
CLEARANCE	<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)										
ATTACHMENTS											
REVIEW	<table border="1" data-bbox="300 1671 1526 1915"> <tr> <td>Department Director: <i>[Signature]</i></td> <td>Date: 12.18.13</td> </tr> <tr> <td>Finance (Budget Approval): <i>If applicable [Signature]</i></td> <td>Date: 12-30-13</td> </tr> <tr> <td>Division Manager: <i>[Signature]</i></td> <td>Date: 1-2-2014</td> </tr> <tr> <td>County Counselor's Office: <i>[Signature]</i></td> <td>Date:</td> </tr> </table>	Department Director: <i>[Signature]</i>	Date: 12.18.13	Finance (Budget Approval): <i>If applicable [Signature]</i>	Date: 12-30-13	Division Manager: <i>[Signature]</i>	Date: 1-2-2014	County Counselor's Office: <i>[Signature]</i>	Date:		
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Division Manager: <i>[Signature]</i>	Date: 1-2-2014										
County Counselor's Office: <i>[Signature]</i>	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.

