

REQUEST FOR LEGISLATIVE ACTION

Dupe

Completed by County Counselor's Office:

~~Res~~/Ord No.: 4729

Sponsor(s): Alfred Jordan

Date: April 27, 2015

<p>SUBJECT</p>	<p>Action Requested <input type="checkbox"/> Resolution <input checked="" type="checkbox"/> Ordinance</p> <p>Project/Title: <u>Jackson County Sheriff's Office request the funding of two part time positions in the Conceal and Carry Permits Unit. The part time positions would be 20 hours per week with a 40 hour maximum per pay period. These positions will assist in the registering and renewing of Concealed Carry Permits for Jackson County residents.</u></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>\$17,224.00</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>\$17,224.00</td> </tr> <tr> <td>Amount budgeted for this item * (including transfers):</td> <td>\$0</td> </tr> <tr> <td>Source of funding (name of fund) and account code number; FROM: 048-2810 Revolving Fund Undesignated Fund Balance</td> <td>FROM ACCT</td> </tr> <tr> <td>TO: 048-4201-55025 Revolving Fund - Sheriff - Part-Time</td> <td>TO ACCT \$16,000.00</td> </tr> <tr> <td>048-4201-55040 Revolving Fund - Sheriff - FICA</td> <td>\$1,224.00</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:	\$17,224.00	Amount previously authorized this fiscal year:	\$0	Total amount authorized after this legislative action:	\$17,224.00	Amount budgeted for this item * (including transfers):	\$0	Source of funding (name of fund) and account code number; FROM: 048-2810 Revolving Fund Undesignated Fund Balance	FROM ACCT	TO: 048-4201-55025 Revolving Fund - Sheriff - Part-Time	TO ACCT \$16,000.00	048-4201-55040 Revolving Fund - Sheriff - FICA	\$1,224.00
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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):</p>														
<p>REQUEST SUMMARY</p>	<p><u>Jackson County Sheriff's Office request the funding of two part time positions in the Conceal and Carry Permits Unit. The part time positions would be 20 hours per week with a 40 hour maximum per pay period. These positions will assist in the registering and renewing of Concealed Carry Permits for Jackson County residents.</u></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"> <tr> <td data-bbox="305 310 1247 373">Department Director: <i>[Signature]</i></td> <td data-bbox="1247 310 1541 373">Date: <i>4/15/15</i></td> </tr> <tr> <td data-bbox="305 373 1247 436">Finance (Budget Approval): <i>If applicable</i> <i>Mary Rasmussen</i></td> <td data-bbox="1247 373 1541 436">Date: <i>4/16/15</i></td> </tr> <tr> <td data-bbox="305 436 1247 499">Division Manager: <i>Mary Jane Bidew</i></td> <td data-bbox="1247 436 1541 499">Date: <i>4/21/15</i></td> </tr> <tr> <td data-bbox="305 499 1247 560">County Counselor's Office:</td> <td data-bbox="1247 499 1541 560">Date:</td> </tr> </table>	Department Director: <i>[Signature]</i>	Date: <i>4/15/15</i>	Finance (Budget Approval): <i>If applicable</i> <i>Mary Rasmussen</i>	Date: <i>4/16/15</i>	Division Manager: <i>Mary Jane Bidew</i>	Date: <i>4/21/15</i>	County Counselor's Office:	Date:
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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:
048-2810	Revolving Undesignated Fund Balance	\$17,224.00

- 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.

