

REQUEST FOR LEGISLATIVE ACTION

Completed by County Counselor's Office:

~~Res~~/Ord No.: 4638
 Sponsor(s): Bob Spence
 Date: July 7, 2014

<p>SUBJECT</p>	<p>Action Requested <input type="checkbox"/> Resolution <input checked="" type="checkbox"/> Ordinance</p> <p>Project/Title: <u>Shelter Insurance appropriation into Facilities Management account</u></p>														
<p>BUDGET INFORMATION <i>To be completed By Requesting Department and Finance</i></p>	<table border="1" data-bbox="326 520 1203 863"> <tr> <td>Amount authorized by this legislation this fiscal year:</td> <td>\$1,576.37</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>\$1,576.37</td> </tr> <tr> <td>Amount budgeted for this item * (including transfers):</td> <td>\$0</td> </tr> <tr> <td colspan="2">Source of funding (name of fund) and account code number:</td> </tr> <tr> <td>From: Undesignated Fund Balance 001-2810</td> <td>\$1,576.37</td> </tr> <tr> <td>To: Auto Maintenance/Repairs 001-1204-56530</td> <td>\$1,576.37</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): n/a Prior Year Actual Amount Spent (if applicable): n/a</p>	Amount authorized by this legislation this fiscal year:	\$1,576.37	Amount previously authorized this fiscal year:	\$0	Total amount authorized after this legislative action:	\$1,576.37	Amount budgeted for this item * (including transfers):	\$0	Source of funding (name of fund) and account code number:		From: Undesignated Fund Balance 001-2810	\$1,576.37	To: Auto Maintenance/Repairs 001-1204-56530	\$1,576.37
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<p>PRIOR LEGISLATION</p>	<p>Prior ordinances and (date): none</p> <p>Prior resolutions and (date): none</p>														
<p>CONTACT INFORMATION</p>	<p>RLA drafted by (name, title, & phone): Marilyn Scothorne, Office Administrator, Facilities Management, 881-3258</p>														
<p>REQUEST SUMMARY</p>	<p>Requesting \$1,567.37 be transferred from 001-2810 Undesignated fund to line item 001-1204-56530 Auto Maintenance/Repairs to repair body damage to 2008 Ford Escape, a Facilities Management fleet vehicle, damaged in an auto accident on May 23, 2014. The operator of the other vehicle was insured by Shelter Insurance.</p> <p>Funds received from Shelter Insurance, Check# 011847646 dated 6-18-14 for \$1,576.37.</p> <p>Please appropriate \$1,576.37 into account 001-1204-56530.</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	Copy of check from Shelter Insurance Co.	
REVIEW	Department Director: Earl Newill	Date: 07/01/14
	Finance (Budget Approval): <i>If applicable</i> <i>Mary Rasmussen</i>	Date: <i>7/2/14</i>
	Division Manager: <i>[Signature]</i>	Date: <i>7/2/14</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.

Supplemental Appropriation Request Jackson County, Missouri

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

Date: July 2, 2014

ORD # 4638

Department / Division	Character/Description	From	To
General Fund - 001			
9999 - Non Specific	47040 - Increase revenues	1,576.37	
2810	Undesignated Fund Balance		1,576.37
2810	Undesignated Fund Balance	1,576.37	
1204 - Facilities Mgmt-KC	56530 - Maint & Repair Auto Equip		1,576.37
		1,576.37	1,576.37


 Budgeting 7/2/14



SHELTER INSURANCE COMPANIES

Ord. 4638

Shelter Mutual Insurance Company - Shelter General Insurance Company

Date: 06/18/2014
Claim No.: AT0000001246744
Loss Date: 05/23/2014

Invoice No.:
Invoice Date: 06/18/2014
Service from:
Service to:

Jackson County Public Works
415 E 12th St Room 105
Kansas City, MO 64106-

Attached below is our draft in the amount of \$1,576.37 on the above claim.

PAYMENT DESCRIPTION:

Damages To 2008 Ford Escape

COVERAGE(S): PROPERTY DAMAGE \$1,576.37

PAYMENT NOTES:

(Please retain this letter for your records.)

THE FACE OF THIS DOCUMENT HAS A COLORED BACKGROUND ON WHITE PAPER

CLAIM NO.	SHELTER INSURANCE COMPANIES	DATE	DRAFT NO.
AT0000001246744	Columbia, Missouri 65218-0001	06/18/2014	011847646

UPON ACCEPTANCE PAY TO THE ORDER OF:

Jackson County Public Works

BOONE COUNTY NATIONAL BANK
Columbia, Missouri 65205

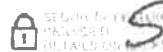
80-85
815

**VOID IF NOT PRESENTED FOR
PAYMENT WITHIN 180 DAYS**

AMOUNT

One thousand five hundred seventy six and 37/100 Dollars

\$1,576.37



S. Daniel Clapp
Authorized Signature

THIS DOCUMENT IS PROTECTED AGAINST ALTERATIONS WITH CHECK PROTECT FEATURES

⑈0 1 184 7646⑈ ⑈08 1 5008 59⑈ 00 1 2580⑈