## REQUEST FOR LEGISLATIVE ACTION

Completed by County Counselor's Office: x8xx/Ord No.: 4906

Date:

Sponsor(s): Scott Burnett October 3, 2016

SUBJECT	Action Requested Resolution Ordinance  Project/Title: Appropriate \$2,478 from 002-9999-47020 Surplus Sale funds to 002-2001-56530 MEO, Maint & Repair					
BUDGET						
INFORMATION	Amount authorized by this legislation this fiscal year:	\$2,478.				
To be completed	Amount previously authorized this fiscal year:	\$0				
By Requesting	Total amount authorized after this legislative action:	\$2,478.				
Department and	Amount budgeted for this item * (including transfers):	\$0				
Finance	Source of funding (name of fund) and account code number; FROM: 002-9999-47020 Surplus sale	FROM ACCT \$2,478.				
	TO	TO ACCT				
	TO: 002-2001-56530 Medical Examiner's Office	TO ACCT				
	002-2001-36330 Medical Examiner's Office	\$2,478.				
	* If account includes additional funds for other expenses, total budgeted in the account is: \$					
	7,					
	OTHER FINANCIAL INFORMATION:					
	☐ No budget impact (no fiscal note required)					
	Term and Supply Contract (funds approved in the annual budget); estimated value and use of contract:					
	Department: Estimated Use: \$					
	Prior Year Budget (if applicable):					
	Prior Year Actual Amount Spent (if applicable):					
DDIOD						
PRIOR	Prior ordinances and (date):					
LEGISLATION	Prior resolutions and (date):					
CONTACT						
INFORMATION	RLA drafted by (name, title, & phone): Kandi Brooke, Administrative Sup	poruinar for				
INFORMATION	Dr. Diane Peterson, Chief Medical Examiner (816) 881-6600	Dervisor for				
	Dr. Diane reterson, Chief Medical Examiner (810) 881-0000					
REQUEST	From proceeds of surplus items, please appropriate \$2,478					
SUMMARY	from 002-9999-47020 Surplus Sale Funds					
DOMINIAICI	to 002-2001-56530 Medical Examiner's Office (Maintenance and Rep	air Auto Equipment)				
	W 302-2001-30350 Hiodical Examiner a Office (Maintenance and Rep	un ratto Equipment)				
CLEARANCE						
CEETIGITICE	☐ Tax Clearance Completed (Purchasing & Department)					
	Business License Verified (Purchasing & Department)					
	Chapter 6 Compliance - Affirmative Action/Prevailing Wage (County Auditor's Office)					
		,				
ATTACHMENTS	Vehicle declaration form					

REVIE	W	Department Director: /	7- MI	1. 0	Date:			
112 , 12		Soparomoni Biroccoi.	Mare Cattleson	AO	09/20/20			
		Finance (Budget Approv			Date: 0/3/			
		If applicable Division Manager:	NA		Date:			
		May You	Brown		9/08/16			
		County Counselor's Offi			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 N	lumber:	Account Title:	Amount Not to Exceed:				
	002-9999-	47020	Surplus Sale Funds	\$2,478.				
			nd does not obligate Jackson County accessity, be determined as each using		nt. The availability of			

This legislative action does not impact the County financially and does not require Finance/Budget approval.

## SURPLUS/TRANSFER DECLARATION FORM JACKSON COUNTY, MISSOURI

## June 2007? Purchase Date Life\*\* Useful Department Transferring Asset: Medical Examiner TRANSFER 1D8HB38P47F570768 Receiving Department Phone Number: Serial/Vin Number Receiving Department Contact: Department Receiving Asset: Date Transfer Received: Dodge Durango Make/Model Model Year 2007 Disposition Code\* 2001 Phone Number: 816-881-6600 SUV 2007 Dodge Durango Asset Description Department Code: SURPLUS □| Transfer Shaun Hachinsky/Tom Medical Exaimner Hensley Please Check: Select only one Asset # Fixed Surplus Point of Contact: Transaction N Department Date Name:

\* Indicate if Asset was (S) Sold, (D) Donated, (R) Recycled, (X) Scrapped, (T) Trade-in, or (O) Other. \*\* Refer to Asset Subclass Listing.

1. User Department send to Finance Department

2. Purchasing Department send to Finance Department

## Supplemental Appropriation Request Jackson County, Missouri

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

Date:	September 23, 2016				ORD# 4906
<del>-</del>	Department / Division	Character/Description	Fro	m	То
Health Fund - 002					
9999		47020 - Sale of Fixed Assets	\$	2,478	
2810		Undesignated Fund Balance			2,478
2810		Undesignated Fund Balance		2,478	
<u>2001 - N</u>	Medical Examiner's Office	56530 - Maint. & Repair - Auto Equip.			2,478
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Budgeting

9/2/16