(for budget transfers and/or unbudgeted expenses)

Date		11/9/2020							
Parent Fund	d	Utilities	Utilities Procurement						
Division		Procurement							
Department	t								
Panuaet for	the following trans	fer he made fo	r the reason(s) state	ed.					
vednesi ioi		l ne made 10		cu.					
	Amount		Cost						
	FROM	Fund	Center	Account	Project	Area	TBD		
	\$ 1,300	42011	650536000	5112010	0000000	00	0000000		
	c								
	\$	+	+						
	\$								
	\$	+ +	+						
	\$	† †							
TOTAL	\$ 1,300	1	<u> </u>	<u> </u>					
. 0 . / (L	Amount	 	Cost			I			
				Δ	Б		TD.		
	TO	Fund	Center	Account	Project	Area	TBD		
	\$ 1,300	42011	390536001	5112010	0000000	00	0000000		
		+ +	+						
	\$	+ +	+						
	\$								
	\$								
	\$								
	\$								
TOTAL	\$ 1,300								
JUSTIFICA	TION (attach additi	⊐ ional back-up a	s necessarv)						
			due to hiring new e	mployee above	minimum rat	te budgete	ed and change		
	e health benefit cov		Ğ	•					
Division Dire	ector								
2.V.OIOI1 DIII	JUL 1								
Department	t Director								
.1									
_									
kecommen	ded or not recomm	nended by	Dudget 9 Marsans	ant Comiters)		/5	loto)		
Pagean		(1	Budget & Managem	ient Services)		(L	Date)		
Reason									
	D / NOT APPROVE	- D							
			Managranasia						
ouard of C	County Commission	oners/County	ıvıanagement _			/5)ate)		
						(1	Jaile)		

Requesting Department or Division: FORWARD TO BUDGET & MANAGEMENT SERVICES

(for budget transfers and/or unbudgeted expenses)

Date	_	11/9/2020							
Parent Fund Transportation									
Division	_	Procurement							
epartment	_								
Request for the	e following transfe	er be made fo	or the reason(s)	stated:					
	Amount		Cost						
	FROM	Fund	Center	Account	Project	Area	TBD		
\$	18,000	14971	520541052	5112010	0000000	00	0000000		
Ť	10,000			37.127.0					
\$									
\$									
\$									
\$									
\$									
TOTAL \$	18,000					•			
	Amount		Cost						
							[
	ТО	Fund	Center	Account	Project	Area	TBD		
\$	18,000	14971	390513095	5112010	0000000	00	0000000		
\$									
\$									
\$									
\$									
	10.000								
TOTAL \$	18,000								
	N (attach additio								
ransfer to cov	er overage in Pe	rsonnel costs	3						
ivision Directo	or								
Wiolon Birook	_								
epartment Dir	rector								
ecommended	d or not recomme								
		((Budget & Mana	Date)					
eason									
PPROVED / I	NOT APPROVED								
oard of Cou	nty Commissior	ners/County	Management						
-	,	,	<u> </u>			([Pate)		

Requesting Department or Division: FORWARD TO BUDGET & MANAGEMENT SERVICES

(for budget transfers and/or unbudgeted expenses)

Date			11/9/2020					
Parent Fund Fire								
Division Communica				tions				
Department	t	•						
-		following transf	er be made f	or the reason(s) sta	ted:			
		Amount		Cost				
		FROM	المراجعة المراجعة		A	Drainat	Λ	TBD
	Φ.		Fund	Center	Account	Project	Area	
	\$	7,000	12191	390513071	5112010	0000000	00	0000000
	\$							
TOTAL	\$	7,000					,	
		Amount		Cost				
		TO	Fund	Center	Account	Project	Area	TBD
	\$	7,000	12191	370522019	5112010	0000000	00	0000000
	Ψ	7,000	12131	010022013	3112010	0000000	00	0000000
								-
TOTAL	\$	7,000						
JUSTIFICA ^T	TION	N (attach addition	nal back-up	as necessary)				
Overspent F				•				
<u> </u>								
Division Div								
Division Dire	ector							
		•						
Department	Dire	ector						
D	اماما							
Recommen	aea	or not recomme	enaea by	/D. J (0 M			/5	2-1-1
Dancer				(Budget & Management Services) (Date)				
Reason								
APPROVE) / N	OT APPROVE	D					
				y Management				
Doald Of C	Journ	ty Commissio	i ioi 3/ Oddili	y Management			/г	Date)
							- 11	20161

Requesting Department or Division: FORWARD TO BUDGET & MANAGEMENT SERVICES

(for budget transfers and/or unbudgeted expenses)

Date			11/5/2024							
Parent Fund	d	_	41000							
Department	t/Divisio	n _	Solid Waste							
BoCC Date 1			11/19/2024							
Request for	the follo	owing transf	ar ha mada f	or the reason(s) sta	tad:					
rtoquest for		mount	or be made it	Cost	lou.		T			
		ROM	Fund	Center	Account	Project	Area	TBD		
	\$	3,500,000	41011	550000410	5998010	0000000	00	0000000		
	\$	2,700,000	41211	550000412	5998010	0000000	00	0000000		
	\$									
TOTAL	\$	6,200,000								
	Α	mount		Cost						
		TO	Fund	Center	Account	Project	Area	TBD		
	\$	250,000	41011	550534010	5359000	0000000	00	0000000		
	\$	3,250,000	41016	550534010	5359000	0000000	00	0000000		
	\$	2,000,000	41211	550534030	5359000	0000000	00	0000000		
	\$	700,000	41212	550534032	5359000	0000000	00	0000000		
TOTAL	Φ.	0.000.000								
		6,200,000								
JUSTIFICA				<u>-</u>				1.		
				as incurred greater						
				log) for Leachate ar Butgeted opeartion o						
Incentive Fe		as incurred g	reater triair L	bulgeted opeartion t	expenses relate	u to increased	i cost oi	i lauleis ailu		
incontive i										
Department	t/Divisio	n Director						-		
		-								
D		,								
Recommen	ded or r	not recomme	_	/Dudget 9 Manager	nant Caminaa)			(Data)		
Reason				(Budget & Manager	nent Services)		((Date)		
1\cason										
APPROVE	D / NOT	APPROVE)							
				/ Management						

Requesting Department or Division: FORWARD TO BUDGET & MANAGEMENT SERVICES

(Date)