

*****SEMINOLE COUNTY BUDGET CHANGE REQUEST*****

Date 6/3/03 BCR# 03-62

FROM: Department Information Technologies Division Information Services Section _____

Signatures: Department Director Chris Grasso Division Manager Kim Patterson

WHAT IS NEEDED:

- Accounting adjustment: Item is budgeted, but funds are in incorrect account line.
- More funds for Budgeted Item: Item is budgeted, but additional funds are required.
- New item: Item is not in this fiscal year's budget.
- Capital Substitution: Substitution or change of a currently budgeted capital item.
- Fund & Acct # _____ Budget Item # _____ Budget Amount \$ _____
- Capital replacement retention: Capital item was slated to be replaced but needs to be retained. BCC# _____

- Describe item and show calculation of all associated costs of item.
- Explain why item is needed. (If equipment is to be replaced, include description, model, year, BCC#)
- Identify source of funds and why these funds are no longer needed for their original intent.
- For savings on capital items give account #, budget item #, amount budgeted, purchase order #, and actual purchase cost.

Salary and travel adjustments within Information Technologies to accommodate transfer of positions associated with reorganization.

FILL IN THIS PORTION IF A TRANSFER OF FUNDS IS NEEDED: Fund #00100 Fund Name General Fund

	FUND/ACCOUNT#	AS400 CIP#	PENT CIP#	ACCOUNT TITLE	TOTAL
TRANSFER FROM	140300 51012000			Regular Salaries	\$65,000
	140300 51021000			Social Security (FICA)	3,442
	140300 51022000			Retirement Contribution	4,931
	140200 51014000			Overtime	15,000
	140200 53040000			Travel and Per Diem	2,000
				TOTAL	\$90,373

	FUND/ACCOUNT#	AS400 CIP#	PENT CIP#	ACCOUNT TITLE	TOTAL
TRANSFER TO	140200 51012000			Regular Salaries	\$60,000
	140200 51021000			Social Security (FICA)	3,442
	140200 51022000			Retirement Contribution	4,931
	140300 51014000			Overtime	20,000
	140300 53040000			Travel and Per Diem	2,000
				TOTAL	\$90,373

CONCURRENCE OF OTHER INVOLVED DIVISIONS (ie: Comp Svcs/hard & software; Fleet/vehicles; Purchasing/capital; Sppt. Svcs; etc)

Signature _____
Div or Dept _____

FISCAL SERVICES

RECOMMENDATION: Approval Disapproval Analyst JK 6/3/03 Director AKM

APPROVING AUTHORITY: ___ DFS Director ___ County Manager BCC (Meeting Date) 6-24-03

Approved Not approved Date Signed _____ Signature _____

FINANCE: Transfer has been posted Date _____ Signature _____