

SEMINOLE COUNTY BUDGET CHANGE REQUEST

Date 8/7/03

BCR#

03-77

FROM: Department Public Safety Division EMS/Fire/Rescue Section _____

Signatures: Department Director Mary Aburto Division Manager Ken Sch...

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.

Funds currently budgeted in the Salary line need to be moved to the Overtime line to allow for minimum staffing of emergency units for the remainder of Fiscal Year 2002/2003. This is partly necessary due to moving the Battalion Chiefs into the 056100 Organization, EMS/Fire/Rescue Division Union, from the 56101 Organization, EMS/Fire/Rescue Division – Non-Union. It is also necessary to adjust for the estimation of required funds for the overtime impact of the merger with The City of Altamonte Springs Fire Department.

FILL IN THIS PORTION IF A TRANSFER OF FUNDS IS NEEDED: Fund #112 Fund Name Fire Protection Fund

	FUND/ACCOUNT#	AS400 CIP#	PENT CIP#	ACCOUNT TITLE	TOTAL
TRANSFER FROM	<u>56100-112000-51012000</u>	_____	_____	<u>Regular Salaries</u>	<u>\$400,000</u>
	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____
				TOTAL	\$400,000
TRANSFER TO	<u>56100-112000-51014000</u>	_____	_____	<u>Overtime</u>	<u>\$400,000</u>
	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____
				TOTAL	\$400,000

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

Deborah Smith Director



APPROVING AUTHORITY: _____ DFS Director _____ County Manager BCC (Meeting Date) 8-26-03

Approved Not approved Date Signed _____ Signature _____

FINANCE: Transfer has been posted Date _____ Signature _____