

SEMINOLE COUNTY BUDGET CHANGE REQUEST

Date Nov. 14, 2003 OMB# 04-001

FROM: Department Judicial Division Public Defender Section Circuit Court Costs

Signatures: Department Director _____ Division Manager _____

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.

The following funds are being directed by the Finance Department to be moved for the purpose of tracking specific professional services required in the County's fiscal reporting. These adjustments involve splitting the attorney billings (Expert Witness Fees, Clinical Evaluations, Travel and Per Diem, Court Interpreters) in order to track expenditures for Article V data.

FILL IN THIS PORTION IF A TRANSFER OF FUNDS IS NEEDED: Fund _____ Fund Name See Below _____

	ACCOUNT NUMBER	ACCOUNT TITLE	AMOUNT
TRANSFER FROM	033400-00100-53031000	Professional Services	26,500
	033400-00100-53049000	Other Charges/Obligations	22,500
	036000-12700-53049000	Other Charges/Obligations	51,000
	TOTAL		100,000
TRANSFER TO	033400-00100-53034500	Court Interpreters	22,500
	033400-00100-53040000	Travel and Per Diem	26,500
	036000-12700-53031500	Expert Witness Fees	11,200
	036000-12700-53031510	Clinical Evaluations	21,600
	036000-12700-53034500	Court Interpreters	18,200
TOTAL:		100,000	

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

Signature _____

Div or Dept _____

OMB RECOMMENDATION: Approval Disapproval Analyst Deborah Smith Director AKM URS

APPROVING AUTHORITY: _____ OMB Director _____ County Manager X BCC (Meeting Date) 12/9/03

Approved Not approved Date Signed _____ Signature _____

FINANCE: Transfer has been posted Date _____ Signature _____