

Budget Amendment Request

POSTED

FY 17-18

Department: Property AssessorAccount: 101-0523107003591**Type of Amendment: (check one)**

- ☒ **Transfer** (no overall change to adopted budget)
- ☐ **Decrease** (reducing adopted budget due to unforeseen effect on "revenue" or "expense")
- ☐ **Increase** (raising adopted budget due to unforeseen effect on "revenue" or "expense")
- ☐ **Adjustment** (correction to adopted budget due to "grant award" or "budgetary adjustment")

*****IF an Increase or Decrease, a memo explaining the need or purpose MUST accompany amendment form*****

	Account Number	Description	Amount
TO	101-052310-500435	Office Supplies	500.00
TOTAL			500.00

	Account Number	Description	Amount
FROM	101-052310-500338	Maintenance & Repair- Vehicles	500.00
TOTAL			500.00

Explanation: Transfer to cover misc office suppliesJ. Hult 1-29-18

Signature of Official/Department Head/Date

1-30-18

Signature of County Mayor/Date

*All requests requiring committee approval are due to Sr. Financial Analyst's Office by noon on the Tuesday before the Budget Committee Meeting.

**Blount County Government
Budget Amendment Request**

POSTED
17003499

FY 17-18

Department: County Trustee

Account: 52400

Type of Amendment: (check one)

- ☒ **Transfer** (no overall change to adopted budget)
☐ **Decrease** (reducing adopted budget due to unforeseen effect on "revenue" or "expense")
☐ **Increase** (raising adopted budget due to unforeseen effect on "revenue" or "expense")
☐ **Adjustment** (correction to adopted budget due to "grant award" or "budgetary adjustment")

*****IF an Increase or Decrease, a memo explaining the need or purpose MUST accompany amendment form*****

	Account Number	Description	Amount
TO	101-052400-500356-0	Tuition	115.00
TOTAL			115.00

	Account Number	Description	Amount
FROM	101-052400-500332-0	Legal Notices	115.00
TOTAL			115.00

Explanation:

Transfer to cover shortage in tuition for employee training.

Signature of Official/Department Head/Date

1/29/18

Signature of County Mayor/Date

1-30-18

***All requests requiring committee approval are due to Sr. Financial Analyst's Office by noon on the Tuesday before the Budget Committee Meeting.**

Blount County Government
Budget Amendment Request

FY 17-18

Department: HWY

Account: 131

POSTED
17003463

Type of Amendment: (check one)

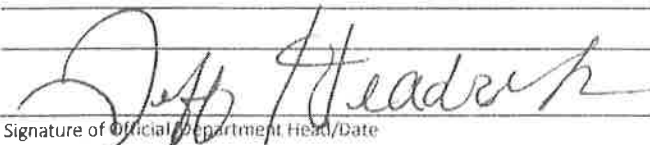
- ☒ **Transfer** (no overall change to adopted budget)
☐ **Decrease** (reducing adopted budget due to unforeseen effect on "revenue" or "expense")
☐ **Increase** (raising adopted budget due to unforeseen effect on "revenue" or "expense")
☐ **Adjustment** (correction to adopted budget due to "grant award" or "budgetary adjustment")

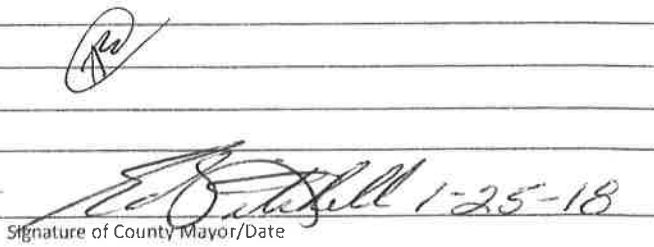
IF an Increase or Decrease, a memo explaining the need or purpose MUST accompany amendment form

	Account Number	Description	Amount
TO	131-062000-500444	SALT	40,000.00
TOTAL			40,000.00

	Account Number	Description	Amount
FROM	131-062000-500404	ASPHALT	40,000.00
TOTAL			40,000.00

Explanation: SNOW REMOVAL


Signature of Official/Department Head/Date

 1-25-18
Signature of County Mayor/Date

*All requests requiring committee approval are due to Sr. Financial Analyst's Office by noon on the Tuesday before the Budget Committee Meeting.

POSTED
17003462

Department: Circuit Court Clerk

Type of Amendment: (check one)

<input checked="" type="checkbox"/> Transfer	(no overall change to adopted budget)
<input type="checkbox"/> Decrease	(reducing adopted budget due to unforeseen effect on "revenue" or "expense")
<input type="checkbox"/> Increase	(raising adopted budget due to unforeseen effect on "revenue" or "expense")
<input type="checkbox"/> Adjustment	(correction to adopted budget due to "grant award" or "budgetary adjustment")

*****IF an Increase or Decrease, a memo explaining the need or purpose MUST accompany amendment form*****

	Account Number	Description	Amount
TO	101-053120-500162	Clerical Personnel	3,204.20
TOTAL			3,204.20

	Account Number	Description	Amount
FROM	101-053120-500169	Part Time Personnel	3,204.20
TOTAL			3,204.20

Explanation: Transfer funds to pay out vacation/comp to employee who has turned in their notice.

Signature of Official/Department Head/Date 1/22/18

Signature of County Mayor/Date

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**Blount County Government
Budget Amendment Request**

POSTED
17063461

FY 17-18

Department: VETERANS
Account: 058300

Type of Amendment: (check one)

- ☒ **Transfer** (no overall change to adopted budget)
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☐ **Increase** (raising adopted budget due to unforeseen effect on "revenue" or "expense")
☐ **Adjustment** (correction to adopted budget due to "grant award" or "budgetary adjustment")

*****IF an Increase or Decrease, a memo explaining the need or purpose MUST accompany amendment form*****

	Account Number	Description	Amount
TO	435	OFFICE SUPPLIES	250.00
	338	MAIN REPAIR SERV VEHICLE	75.00
TOTAL			325.00

	Account Number	Description	Amount
FROM	356	TUITION	200.00
	332	LEGAL NOTICE-REC-COURT	50.00
	355	TRAVEL	75.00
TOTAL			325.00

Explanation: _____



 1-24-18
Signature of Official/Department Head/Date

 1-25-18
Signature of County Mayor/Date

*All requests requiring committee approval are due to Sr. Financial Analyst's Office by noon on the Tuesday before the Budget Committee Meeting.

**Blount County Government
Budget Amendment Request**

POSTED
17003460

FY 17-18

Department: Library
Account: 115

Type of Amendment: (check one)

- ☒ **Transfer** (no overall change to adopted budget)
☐ **Decrease** (reducing adopted budget due to unforeseen effect on "revenue" or "expense")
☐ **Increase** (raising adopted budget due to unforeseen effect on "revenue" or "expense")
☐ **Adjustment** (correction to adopted budget due to "grant award" or "budgetary adjustment")

*****IF an Increase or Decrease, a memo explaining the need or purpose MUST accompany amendment form*****

	Account Number	Description	Amount
TO	115-051800-500166	Custodial Personnel	45,779.00
TOTAL			45,779.00

	Account Number	Description	Amount
FROM	115-051800-500167	Maintenance Personnel	34,947.00
	115-051800-500169	Part Time Personnel	10,832.00
TOTAL			45,779.00

Explanation: payroll adj. move in-line with COA

1/24/18

Signature of Official/Department Head/Date

Signature of County Mayor/Date

*All requests requiring committee approval are due to Sr. Financial Analyst's Office by noon on the Tuesday before the Budget Committee Meeting.

POSTED
1700 3432

Department: Maintenance

Type of Amendment: (check one)

- ***IF an Increase or Decrease, a memo explaining the need or purpose MUST accompany amendment form*****

*All requests requiring committee approval are due to Sr. Financial Analyst's Office by noon on the Tuesday before the Budget Committee Meeting.

Budget Amendment Request

FY 17-18

Department: Sheriff

Account: 101-054210

POSTED
17003407Type of Amendment: (check one)

- ☒ **Transfer** (no overall change to adopted budget)
- ☐ **Decrease** (reducing adopted budget due to unforeseen effect on "revenue" or "expense")
- ☐ **Increase** (raising adopted budget due to unforeseen effect on "revenue" or "expense")
- ☐ **Adjustment** (correction to adopted budget due to "grant award" or "budgetary adjustment")

IF an Increase or Decrease, a memo explaining the need or purpose MUST accompany amendment form

	Account Number	Description	Amount
TO	101-054210-500413-0	Drugs and Medical Supplies	2,000.00
TOTAL			2,000.00

	Account Number	Description	Amount
FROM	101-054210-500335-0	Maint & Repair Services - Buildings	2,000.00
TOTAL			2,000.00

Explanation: To put funds in account needed to order court-ordered drug tests

James Perrong by P. Comu
Signature of Official/Department Head/Date 1-19-18

[Signature] 1-22-18
Signature of County Mayor/Date

*All requests requiring committee approval are due to Sr. Financial Analyst's Office by noon on the Tuesday before the Budget Committee Meeting.

Budget Amendment Request

FY 17-18

Department: 101-51240

Account: other boards/transition project

POSTED
1703303**Type of Amendment: (check one)**

- ☒ **Transfer** (no overall change to adopted budget)
☐ **Decrease** (reducing adopted budget due to unforeseen effect on "revenue" or "expense")
☐ **Increase** (raising adopted budget due to unforeseen effect on "revenue" or "expense")
☐ **Adjustment** (correction to adopted budget due to "grant award" or "budgetary adjustment")

*****IF an Increase or Decrease, a memo explaining the need or purpose MUST accompany amendment form*****

	Account Number	Description	Amount
TO	101-51240-500435	Office Supplies	300.00
	101-51240-500355	Travel	1,000.00
TOTAL			1,300.00

	Account Number	Description	Amount
FROM	100-51240-500168	Temporary Personnel	1,300.00
TOTAL			1,300.00

Explanation: _____

 Signature of Official/Department Head/Date 1/11/18 Signature of County Mayor/Date 1-13-18

*All requests requiring committee approval are due to Sr. Financial Analyst's Office by noon on the Tuesday before the Budget Committee Meeting.

**Blount County Government
Budget Amendment Request**

FY 17-18

Department: Property Assessor
Account: 101-052300

POSTED
17003301

Type of Amendment: (check one)

- ☒ **Transfer** (no overall change to adopted budget)
☐ **Decrease** (reducing adopted budget due to unforeseen effect on "revenue" or "expense")
☐ **Increase** (raising adopted budget due to unforeseen effect on "revenue" or "expense")
☐ **Adjustment** (correction to adopted budget due to "grant award" or "budgetary adjustment")

*****IF an Increase or Decrease, a memo explaining the need or purpose MUST accompany amendment form*****

	Account Number	Description	Amount
TO	101-052300-500499	Other supplies & materials	600.00
TOTAL			600.00

	Account Number	Description	Amount
FROM	101-052300-500356	Tuition	600.00
TOTAL			600.00

Explanation: Transfer funds in order to pay Marshall & Swift bill



J. Hill 1-12-18 [Signature] 1-13-18

Signature of Official/Department Head/Date Signature of County Mayor/Date

***All requests requiring committee approval are due to Sr. Financial Analyst's Office by noon on the Tuesday before the Budget Committee Meeting.**

POSTED

Account: 101-57500

7003302

*All requests requiring committee approval are due to Sr. Financial Analyst's Office by noon on the Tuesday before the Budget Committee Meeting.

POSTED
17003259

Account: 101-53910

☒ **Transfer** (no overall change to adopted budget)
☐ **Decrease** (reducing adopted budget due to unforeseen effect on "revenue" or "expense")
☐ **Increase** (raising adopted budget due to unforeseen effect on "revenue" or "expense")
☐ **Adjustment** (correction to adopted budget due to "grant award" or "budgetary adjustment")

	Account Number	Description	Amount
TO	101-53910-500435	OFFICE SUPPLIES	1,500.00
TOTAL			1,500.00

	Account Number	Description	Amount
FROM	101-53910-500399	OTHER CONTRACTED SERVICES	1,500.00
TOTAL			1,500.00

[Handwritten signature]

Signature of County Mayor/Date

*All requests requiring committee approval are due to Sr. Financial Analyst's Office by noon on the Tuesday before the Budget Committee Meeting.

POSTED
17003258

Department: Library
Account: 115

☒ **Transfer** (no overall change to adopted budget)
☐ **Decrease** (reducing adopted budget due to unforeseen effect on "revenue" or "expense")
☐ **Increase** (raising adopted budget due to unforeseen effect on "revenue" or "expense")
☐ **Adjustment** (correction to adopted budget due to "grant award" or "budgetary adjustment")

	Account Number	Description	Amount
TO	115-051800-500334-0	Maintenance Agreements	704.00
TOTAL			704.00

	Account Number	Description	Amount
FROM	115-051800-500499-0	Other Supplies & Materials	704.00
TOTAL			704.00

Explanation: move in line w/COA

Signature of County Mayor/Dat: 1-10-18

*All requests requiring committee approval are due to Sr. Financial Analyst's Office by noon on the Tuesday before the Budget Committee Meeting.

POSTED
17003257

Department: Hwy

17003257

*all requests requiring committee approval are due to Sr. Financial Analyst's Office by noon on the Tuesday before the Budget Committee Meeting.

POSTED

17003209

Department: Accounting

Account: _____

<input checked="" type="checkbox"/> Transfer	(no overall change to adopted budget)
<input type="checkbox"/> Decrease	(reducing adopted budget due to unforeseen effect on "revenue" or "expense")
<input type="checkbox"/> Increase	(raising adopted budget due to unforeseen effect on "revenue" or "expense")
<input type="checkbox"/> Adjustment	(correction to adopted budget due to "grant award" or "budgetary adjustment")

	Account Number	Description	Amount
20	101-52100-500356	Tuition	200.00
FRONT			
TOTAL			200.00

[illegible]

Signature of Official/Department Head/Date

Signature of County Mayor/Date

1-8-1A

*All requests requiring committee approval are due to Sr. Financial Analyst's Office by noon on the Tuesday before the Budget Committee Meeting.

**Blount County Government
Budget Amendment Request**

POSTED
17003230

FY 17-18

Department: Risk Management

Account: _____

Type of Amendment: (check one)

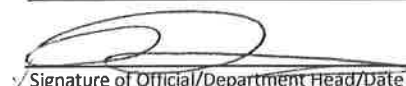
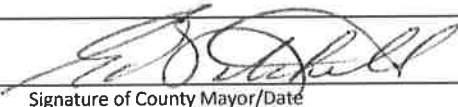
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*****IF an Increase or Decrease, a memo explaining the need or purpose MUST accompany amendment form*****

	Account Number	Description	Amount
TO	263-58900-500506	liability insurance	3,389.00
TOTAL			3,389.00

	Account Number	Description	Amount
FROM	263-58900-500506 500506 500599	other charges	3,389.00
TOTAL			3,389.00

Explanation: to cover animal shelter vehicle insurance

 1/3/18  1-8-18
 Signature of Official/Department Head/Date Signature of County Mayor/Date

*All requests requiring committee approval are due to Sr. Financial Analyst's Office by noon on the Tuesday before the Budget Committee Meeting.

**Blount County Government
Budget Amendment Request**

POSTED
17003182

FY 17-18

Department: Risk Management

Account: 263-58900

Type of Amendment: (check one)

- ☒ **Transfer** (no overall change to adopted budget)
☐ **Decrease** (reducing adopted budget due to unforeseen effect on "revenue" or "expense")
☐ **Increase** (raising adopted budget due to unforeseen effect on "revenue" or "expense")
☐ **Amendment** (correction to adopted budget due to "grant award" or "budgetary adjustment")

*****IF an Increase or Decrease, a memo explaining the need or purpose MUST accompany amendment form*****

	Account Number	Description	Amount
TO	263-58900-500331-0	legal	460.50
TOTAL			460.50

	Account Number	Description	Amount
FROM	263-58900-500325	fiscal agent	460.50
TOTAL			460.50

Explanation: to cover legal bill from Craig Garrett

Distalions by Lindsey Jackson
 Signature of Official/Department Head/Date

E. Bethell 1-2-18
 Signature of County Mayor/Date

*All requests requiring committee approval are due to Sr. Financial Analyst's Office by noon on the Tuesday before the Budget Committee Meeting.

POSTED
17003181

Account: 101-051310-

<input checked="" type="checkbox"/> Transfer	(no overall change to adopted budget)
<input type="checkbox"/> Decrease	(reducing adopted budget due to unforeseen effect on "revenue" or "expense")
<input type="checkbox"/> Increase	(raising adopted budget due to unforeseen effect on "revenue" or "expense")
<input type="checkbox"/> Adjustment	(correction to adopted budget due to "grant award" or "budgetary adjustment")

	Account Number	Description	Amount
TO	101-051310-500320	Dues & Memberships	200.00
TOTAL			200.00

	Account Number	Description	Amount
FROM	101-051310-500356	Tuition	200.00
TOTAL			200.00

Signature of Official/Department Head/Date: Jodie King 12/29/17

Signature of County Mayor/Date: [Signature] 1-2-18

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