

COUNTY OF COMAL
REQUEST FOR BUDGET AMENDMENT

BUDGET YEAR: 2017

Dept: SHERIFF'S OFFICE

DATE OF REQUEST 09/12/17

FROM:

ACCOUNT NUMBER

DESCRIPTION:

AMOUNT:

ACCOUNT NUMBER	DESCRIPTION:	AMOUNT:
017-5841	Training and Education	(\$12,000)

TO:

ACCOUNT NUMBER

DESCRIPTION:

AMOUNT:

ACCOUNT NUMBER	DESCRIPTION:	AMOUNT:
017-5440	Continuing Education and Travel	\$12,000

Justification for request:

Line item transfer to cover expenses for the remainder of 2017

Signed:

Mark W. Reynolds
Department Head

Signed:

Jessie Rahe
Jessie Rahe, County Auditor
(Certification of availability of funds in appropriate line items)

NOTE:

IF THE REQUEST IS FOR ACTION OTHER THAN A LINE ITEM TRANSFER WITHIN THE REQUESTING DEPARTMENT'S BUDGET, THE DEPARTMENT HEAD SHALL SIGN THE CERTIFICATION BELOW:

I HAVE THOROUGHLY REVIEWED THE BALANCES IN THE VARIOUS LINE ITEMS IN THE DEPARTMENT BUDGET, COMPARED THESE WITH THE PROJECTED NEEDS FOR THE REMAINDER OF THE BUDGET YEAR, AND DO HEREBY CERTIFY THAT NO FUNDS ARE AVAILABLE WITHIN THE DEPARTMENT BUDGET TO MEET THE NEEDS AS DESCRIBED ABOVE.

Signed:

Mark W. Reynolds
Department Head