## COUNTY OF COMAL REQUEST FOR BUDGET AMENDMENT

BUDGET YEAR: 2018	Dept: Sheriff's Office Federal Asset Sharing Fund	DATE OF REQUEST	03/27/18
FROM:			
ACCOUNT NUMBER	DESCRIPTION: AMOUNT		NI:
	Fund Balance Reserves		(30,000.00)
TO:			(30,000.00)
ACCOUNT NUMBER	DESCRIPTION:	AMOU	NT:
117.117.5614	Non-capital Equipment		30,000.00
Justification for request:			30,000.00
To provide funds for additional	exercise equipment for the Sheriff's Office.		
Signed:	Signed:		
Mulli Remille Department Head	Jesse Rahe, County Auditor		
NOTE:	(Certification of availability of funds	s in appropriate line ite	ms)
	THER THAN A LINE ITEM TRANSFER WITHIN THE REQIPARTMENT HEAD SHALL SIGN THE CERTIFICATION BE		
I HAVE THOROUGHLY REVIEWE	ED THE BALANCES IN THE VARIOUS LINE ITEMS I	N THE	
DEPARTMENT BUDGET, COMPA	ARED THESE WITH THE PROJECTED NEEDS FOR	THE	

Signed: Remutes

Department Head

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.