

**DEPARTMENT/FUND
APPROPRIATION ADJUSTMENT FORM**

Fiscal Year	Agenda Item needed (yes/no)	Anticipated Meeting Date if applicable	Memo Attached if Board item
22/23	Yes	11/2/2022	<input type="checkbox"/>

Please use one form per agenda item.

Sources (Fund Balance, Revenues, Transfers In, etc...)							
Fund	Input "yes" if change in Fund Balance (2511)	Cost Center	Sub Ledger	Object Code	Current Budget	Adjustment Add/ (Subtract)	New Revised Budget
116		2402157		421000	\$90,000	\$30,000	\$120,000
213		3311003		457990	\$23,322,308	(\$30,000)	\$23,292,308
Insert rows above this line and copy New Revised Budget formula down							
Net Source Adjustment						\$0	

Uses (Expenditures, Transfers Out, etc...)							
Fund		Cost Center	Sub Ledger	Object Code	Current Budget	Adjustment Add/ (Subtract)	New Revised Budget
116		2402157		511130	\$72,388	\$24,129	\$96,517
116		2402157		512010	\$6,100	\$1,890	\$7,990
116		2402157		512040	\$8,112	\$2,827	\$10,939
116		2402157		512070	\$3,400	\$1,154	\$4,554
213		3311003		599500	\$23,322,308	(\$30,000)	\$23,292,308
Insert rows above this line and copy New Revised Budget formula down							
Net Use Adjustment						\$0	

Net Change	\$0	
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Prepared by: Linda Martinez	Date: 10/13/2022
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Explanation: Budget Appropriation for: Governor's Highway Safety - DUI/Impaired Driving Enforcement Award 2023-405d-034 Amendment No. 2023-08 between the Governor's Office of Highway Safety and Pinal County through the Pinal County Sheriff's. Amendment Amount \$30,000.00 for Overtime and ERE for GOHS Southern Regional DRE Training. New Award Amount: \$120,000.00. (Overtime/ERE)
Award Period id 10/01/22 - 09/30/23 Reimbursement CFDA #: 20.616

TYPE OF REQUEST:

- Transfer within same Cost Center
- Transfer between Cost Centers within same Fund
- Transfer between Funds or Transfer In/Out adjustments
- Transfer from/to of Reserve/Contingency (e.g., new grant, change in special revenue projection, new project)
- Change in Fund Balance Appropriation

For Budget Office Use Only

BUDGET OFFICE APPROVAL
BY: _____
DATE: _____

COUNTY MANAGER APPROVAL
BY: _____
DATE: _____

POSTED
BY: _____
DATE: _____