

**DEPARTMENT/FUND
APPROPRIATION ADJUSTMENT FORM**

Fiscal Year	Agenda Item needed (yes/no)	Anticipated Meeting Date if applicable	Memo Attached if Board item
23/24	Yes	11/1/2023	<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	Subsidiary	Current Budget	Adjustment Add/ (Subtract)	New Revised Budget
203		TBD		427000		\$0	\$1,000,000	\$1,000,000
213		3311003		457990		\$15,753,696	(\$1,000,000)	\$14,753,696
								\$0
								\$0
								\$0
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	Subsidiary	Current Budget	Adjustment Add/ (Subtract)	New Revised Budget
203		TBD		511010		\$0	\$293,781	\$293,781
203		TBD		511130		\$0	\$109,521	\$109,521
203		TBD		512010		\$0	\$39,393	\$39,393
203		TBD		512040		\$0	\$51,515	\$51,515
203		TBD		512060		\$0	\$37,176	\$37,176
203		TBD		512070		\$0	\$24,614	\$24,614
203		TBD		550399		\$0	\$444,000	\$444,000
213		3311003		599500		\$15,753,696	(\$1,000,000)	\$14,753,696
								\$0
								\$0
								\$0
								\$0
								\$0
								\$0
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: Jen Hansen	Date:
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Explanation: The Local Border Support funding will directly support the Anti-Smuggling Unit (ASU), the Pinal County Narcotics Task Force (PCNTF), and our Gang and Habitual Offender Strike Team (GHOST) unit. This funding request would provide funding for PCSO employees assigned to our Anti-Smuggling Unit (ASU), equaling \$556k for salaries and employee related expenses. Additionally, PCSO will be purchasing equipment valued at \$444k to be used by ASU, PCNTF and/or GHOST, all of which work in direct support of PCSO targeting and prosecuting those involved in illegal drug manufacture, transport or sales.

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: _____
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