

**DEPARTMENT/FUND  
APPROPRIATION ADJUSTMENT FORM**

Fiscal Year	Agenda Item needed (yes/no)	Anticipated Meeting Date if applicable	Memo Attached if Board item
FY23/24	yes	4/24/2024	<input checked="" 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
187		2305006		421000	\$269,191	\$50,000	\$319,191
213		3311003		457990	\$9,389,070	(\$50,000)	\$9,339,070
Insert rows above this line and copy New Revised Budget formula down							
<b>Net Source Adjustment</b>						\$0	

Uses (Expenditures, Transfers Out, etc....)							
Fund		Cost Center	Sub Ledger	Object Code	Current Budget	Adjustment Add/ (Subtract)	New Revised Budget
187		2305006		530520	\$65,000	\$9,000	\$74,000
187		2305006		530525	\$54,191	\$5,500	\$59,691
187		2305006		530600	\$50,000	\$16,000	\$66,000
187		2305006		532045	\$80,000	\$16,000	\$96,000
187		2305006		540251	\$20,000	\$3,500	\$23,500
213		3311003		599500	\$9,389,070	(\$50,000)	\$9,339,070
Insert rows above this line and copy New Revised Budget formula down							
<b>Net Use Adjustment</b>						\$0	

<b>Net Change</b>	\$0
-------------------	-----

Prepared by: Amanda Stanford	Date: 4/11/2024
------------------------------	-----------------

**Explanation:** Request to accept additional American Rescue Plan Act (ARPA) funds for agreement VC-24-012 between the Arizona Criminal Justice Commission and Pinal County, through the Pinal County Board of Supervisors. The Pinal County Attorney's Office will use the additional ARPA funding for the Victim Compensation Program to help victims of crime.

**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 projec
- Change in Fund Balance Appropriation

**For Budget Office Use Only**

BUDGET OFFICE APPROVAL BY: _____ DATE: _____	COUNTY MANAGER APPROVAL BY: _____ DATE: _____	POSTED BY: _____ DATE: _____
--	---	------------------------------------