

BOARD BUDGET AMENDMENT REQUEST FORM

Please type in the green boxes.

Name of the Person submitting the request: Audrey Ables
 Telephone Extension: 43485

APPROPRIATION FROM: Accounts & Amount to be reduced

	<u>FUND</u> <u>XXXX</u>	<u>CENTER</u> <u>XXXXXX</u>	<u>ACCOUNT</u> <u>XXXXXXXX</u>	<u>PROGRAM</u> <u>XXXX</u>	<u>PROJECT</u> <u>XXXXXXXX</u>	<u>CURRENT</u> <u>BUDGET</u>	<u>REQUESTED</u> <u>REDUCTION</u> <small>(Rounded Up to \$10)</small>
Account 1	0001	114100	5995010	1008	0000000	101,829,310	60,000
Account 2							
Account 3							
Account 4							
Account 5							
Account 6							
Account 7							
Account 8							
Account 9							
Account 10							
Total						101,829,310	60,000

APPROPRIATION TO: Accounts & Amount to be increased

	<u>FUND</u> <u>XXXX</u>	<u>CENTER</u> <u>XXXXXX</u>	<u>ACCOUNT</u> <u>XXXXXXXX</u>	<u>PROGRAM</u> <u>XXXX</u>	<u>PROJECT</u> <u>XXXXXXXX</u>	<u>CURRENT</u> <u>BUDGET</u>	<u>REQUESTED</u> <u>INCREASE</u> <small>(Rounded Up to \$10)</small>
Account 1	0001	111010	5110001	1181	0000000	1,415,460	60,000
Account 2							
Account 3							
Account 4							
Account 5							
Account 6							
Account 7							
Account 8							
Account 9							
Account 10							
Total						1,415,460	60,000

Budget Amendment Questions:

Please provide a concise answer to each of the following questions. If any questions are not applicable, enter N/A.

1. Why is this budget amendment required? Provide an explanation indicating why additional appropriation is required for each of the line items listed in the "APPROPRIATION TO" section.

The Commissioners budgets were proposed prior to the state's decision on Commissioner salary increases. Therefore, their salaries are exceeding their FY24 budgeted amounts.

2. Why are funds available for realignment? Provide an explanation indicating why funds are available for each of the line items listed in the "APPROPRIATION FROM" section.

These funds are available due to required reserves in accordance with Florida Statutes

3. Is this amendment related to a previous Board action? (i.e. change order, contract approval, etc.) If so, please indicate the type of action and date approved.

No

4. For requests submitted after the new year budget development process, is this amendment consistent with the current year 9/30 projections provided in the budget?

Yes

5. If the amendment is related to the Capital Improvement Program, is this consistent with the multi-year plan and how will it affect current or future year plans?

N/A

6. If this request is submitted by anyone other than the Department Director, please confirm this amendment has (Type name of Director and date approved)

Chris Rose April 26, 2024

BOARD BUDGET AMENDMENT REQUEST FORM

Please type in the green boxes.

Name of the Person submitting the request: Shane Kunze
 Telephone Extension: 44599

APPROPRIATION FROM: Accounts & Amount to be reduced

	FUND <small>XXXX</small>	CENTER <small>XXXXXX</small>	ACCOUNT <small>XXXXXXXX</small>	PROGRAM <small>XXXX</small>	PROJECT <small>XXXXXXXX</small>	CURRENT BUDGET	REQUESTED REDUCTION <small>(Rounded Up to \$10)</small>
Account 1	0001	114100	5995010	1008	0000000	101,829,310	157,000
Account 2							
Account 3							
Account 4							
Account 5							
Account 6							
Account 7							
Account 8							
Account 9							
Account 10							
Total						101,829,310	157,000

APPROPRIATION TO: Accounts & Amount to be increased

	FUND <small>XXXX</small>	CENTER <small>XXXXXX</small>	ACCOUNT <small>XXXXXXXX</small>	PROGRAM <small>XXXX</small>	PROJECT <small>XXXXXXXX</small>	CURRENT BUDGET	REQUESTED INCREASE <small>(Rounded Up to \$10)</small>
Account 1	0001	114300	5810001	1103	0000000	25,863,920	157,000
Account 2							
Account 3							
Account 4							
Account 5							
Account 6							
Account 7							
Account 8							
Account 9							
Account 10							
Total						25,863,920	157,000

Budget Amendment Questions:

Please provide a concise answer to each of the following questions. If any questions are not applicable, enter N/A.

1. Why is this budget amendment required? Provide an explanation indicating why additional appropriation is required for each of the line items listed in the "APPROPRIATION TO" section.

Realignment of \$157,000 from General Fund Reserves for payment to the City of Clearwater for the new North Greenwood Community Redevelopment Agency tax increment revenue. This CRA was approved by the Board in May 2023 and was not included in the FY24 calculation for the Adopted Budget.

2. Why are funds available for realignment? Provide an explanation indicating why funds are available for each of the line items listed in the "APPROPRIATION FROM" section.

Funds are available in the FY24 Contingency Reserve, in accordance with Florida Statutes.

3. Is this amendment related to a previous Board action? (i.e. change order, contract approval, etc.) If so, please indicate the type of action and date approved.

CRA was approved by the Board in May 2023.

4. For requests submitted after the new year budget development process, is this amendment consistent with the current year 9/30 projections provided in the budget?

Yes

5. If the amendment is related to the Capital Improvement Program, is this consistent with the multi-year plan and how will it affect current or future year plans?

N/A

6. If this request is submitted by anyone other than the Department Director, please confirm this amendment has (Type name of Director and date approved)

Chris Rose May 2, 2024

BOARD BUDGET AMENDMENT REQUEST FORM

Please type in the green boxes.

Name of the Person submitting the request: Shane Kunze
 Telephone Extension: 44599

APPROPRIATION FROM: Accounts & Amount to be reduced

	<u>FUND</u> <u>XXXX</u>	<u>CENTER</u> <u>XXXXXX</u>	<u>ACCOUNT</u> <u>XXXXXXXX</u>	<u>PROGRAM</u> <u>XXXX</u>	<u>PROJECT</u> <u>XXXXXXXX</u>	<u>CURRENT</u> <u>BUDGET</u>	<u>REQUESTED</u> <u>REDUCTION</u> <small>(Rounded Up to \$10)</small>
Account 1	0001	114300	5820001	1124	0000000	80,500	40,000
Account 2							
Account 3							
Account 4							
Account 5							
Account 6							
Account 7							
Account 8							
Account 9							
Account 10							
Total						80,500	40,000

APPROPRIATION TO: Accounts & Amount to be increased

	<u>FUND</u> <u>XXXX</u>	<u>CENTER</u> <u>XXXXXX</u>	<u>ACCOUNT</u> <u>XXXXXXXX</u>	<u>PROGRAM</u> <u>XXXX</u>	<u>PROJECT</u> <u>XXXXXXXX</u>	<u>CURRENT</u> <u>BUDGET</u>	<u>REQUESTED</u> <u>INCREASE</u> <small>(Rounded Up to \$10)</small>
Account 1	0001	114300	5830001	1116	0000000	156,600	40,000
Account 2							
Account 3							
Account 4							
Account 5							
Account 6							
Account 7							
Account 8							
Account 9							
Account 10							
Total						156,600	40,000

Budget Amendment Questions:

Please provide a concise answer to each of the following questions. If any questions are not applicable, enter N/A.

1. Why is this budget amendment required? Provide an explanation indicating why additional appropriation is required for each of the line items listed in the "APPROPRIATION TO" section.

Appropriations are being realigned within General Government from the unused BP Economic Settlement Projects to increase funding for Creative to complete the County's Cultural Plan.

2. Why are funds available for realignment? Provide an explanation indicating why funds are available for each of the line items listed in the "APPROPRIATION FROM" section.

unused funds from the BP Economic Settlement Projects.

3. Is this amendment related to a previous Board action? (i.e. change order, contract approval, etc.) If so, please indicate the type of action and date approved.

Yes, BP Economic Settlement Projects have been appropriated in prior Board actions.

4. For requests submitted after the new year budget development process, is this amendment consistent with the current year 9/30 projections provided in the budget?

Yes

5. If the amendment is related to the Capital Improvement Program, is this consistent with the multi-year plan and how will it affect current or future year plans?

N/A

**6. If this request is submitted by anyone other than the Department Director, please confirm this amendment has
(Type name of Director and date approved)**

Chris Rose May 2, 2024

BOARD BUDGET AMENDMENT REQUEST FORM

Please type in the green boxes.

Name of the Person submitting the request: Shane Kunze
 Telephone Extension: 44599

APPROPRIATION FROM: Accounts & Amount to be reduced

	<u>FUND</u> <small>XXXX</small>	<u>CENTER</u> <small>XXXXXX</small>	<u>ACCOUNT</u> <small>XXXXXXXX</small>	<u>PROGRAM</u> <small>XXXX</small>	<u>PROJECT</u> <small>XXXXXXXX</small>	<u>CURRENT</u> <u>BUDGET</u>	<u>REQUESTED</u> <u>REDUCTION</u> <small>(Rounded Up to \$10)</small>
Account 1	0001	114100	5995010	1008	0000000	101,829,310	30,000
Account 2							
Account 3							
Account 4							
Account 5							
Account 6							
Account 7							
Account 8							
Account 9							
Account 10							
Total						101,829,310	30,000

APPROPRIATION TO: Accounts & Amount to be increased

	<u>FUND</u> <small>XXXX</small>	<u>CENTER</u> <small>XXXXXX</small>	<u>ACCOUNT</u> <small>XXXXXXXX</small>	<u>PROGRAM</u> <small>XXXX</small>	<u>PROJECT</u> <small>XXXXXXXX</small>	<u>CURRENT</u> <u>BUDGET</u>	<u>REQUESTED</u> <u>INCREASE</u> <small>(Rounded Up to \$10)</small>
Account 1	0001	171011	5310001	1202	0000000	250,000	30,000
Account 2							
Account 3							
Account 4							
Account 5							
Account 6							
Account 7							
Account 8							
Account 9							
Account 10							
Total						250,000	30,000

Budget Amendment Questions:

Please provide a concise answer to each of the following questions. If any questions are not applicable, enter N/A.

1. Why is this budget amendment required? Provide an explanation indicating why additional appropriation is required for each of the line items listed in the "APPROPRIATION TO" section.

Additional funding to support higher than anticipated outside general counsel expenditures.

2. Why are funds available for realignment? Provide an explanation indicating why funds are available for each of the line items listed in the "APPROPRIATION FROM" section.

Funds are available in the FY24 Contingency Reserve, in accordance with Florida Statutes.

3. Is this amendment related to a previous Board action? (i.e. change order, contract approval, etc.) If so, please indicate the type of action and date approved.

No

4. For requests submitted after the new year budget development process, is this amendment consistent with the current year 9/30 projections provided in the budget?

Yes

5. If the amendment is related to the Capital Improvement Program, is this consistent with the multi-year plan and how will it affect current or future year plans?

N/A

6. If this request is submitted by anyone other than the Department Director, please confirm this amendment has (Type name of Director and date approved)

Chris Rose April 26, 2024

BOARD BUDGET AMENDMENT REQUEST FORM

Please type in the green boxes.

Name of the Person submitting the request: Veronica Ettel on behalf of Jolanda Jordan
 Telephone Extension: 418-6929

APPROPRIATION FROM: Accounts & Amount to be reduced

	FUND <u>XXXX</u>	CENTER <u>XXXXXX</u>	ACCOUNT <u>XXXXXXXX</u>	PROGRAM <u>XXXX</u>	PROJECT <u>XXXXXXXX</u>	CURRENT BUDGET	REQUESTED REDUCTION <small>(Rounded Up to \$10)</small>
Account 1	0001	114300	5120010	1116	0000000	2,190,120	456,220
Account 2							
Account 3							
Account 4							
Account 5							
Account 6							
Account 7							
Account 8							
Account 9							
Account 10							
Total						2,190,120	456,220

APPROPRIATION TO: Accounts & Amount to be increased

	FUND <u>XXXX</u>	CENTER <u>XXXXXX</u>	ACCOUNT <u>XXXXXXXX</u>	PROGRAM <u>XXXX</u>	PROJECT <u>XXXXXXXX</u>	CURRENT BUDGET	REQUESTED INCREASE <small>(Rounded Up to \$10)</small>
Account 1	0001	252032	5120010	1004	0000000	-60,250	25,650
Account 2	0001	254210	5120010	1386	0000000	-262,900	68,000
Account 3	0001	254011	5120010	1390	0000000	-237,140	74,450
Account 4	0001	253230	5120010	1386	0000000	-210,210	98,250
Account 5	0001	253220	5120010	1386	0000000	-198,720	74,790
Account 6	0001	251020	5120010	1391	0000000	-191,430	66,770
Account 7	0001	254220	5120010	1386	0000000	-296,590	48,310
Account 8							
Account 9							
Account 10							
Total						-1,457,240	456,220

Budget Amendment Questions:

Please provide a concise answer to each of the following questions. If any questions are not applicable, enter N/A.

1. Why is this budget amendment required? Provide an explanation indicating why additional appropriation is required for each of the line items listed in the "APPROPRIATION TO" section.

The projected salary savings from vacant positions during periods of normal staff turnover were over-estimated for FY24 in the Parks and Conservation Resources Department.

2. Why are funds available for realignment? Provide an explanation indicating why funds are available for each of the line items listed in the "APPROPRIATION FROM" section.

Funds are available in the FY24 General Government Budget for Personnel Attrition.

3. Is this amendment related to a previous Board action? (i.e. change order, contract approval, etc.) If so, please indicate the type of action and date approved.

No

4. For requests submitted after the new year budget development process, is this amendment consistent with the current year 9/30 projections provided in the budget?

Yes

5. If the amendment is related to the Capital Improvement Program, is this consistent with the multi-year plan and how will it affect current or future year plans?

N/A

6. If this request is submitted by anyone other than the Department Director, please confirm this amendment has (Type name of Director and date approved)

Paul Cozzie April 18, 2024

BOARD BUDGET AMENDMENT REQUEST FORM

Please type in the green boxes.

Name of the Person submitting the request: Keri Vizandiou

Telephone Extension: 48202

APPROPRIATION FROM: Accounts & Amount to be reduced

	<u>FUND</u> <u>XXXX</u>	<u>CENTER</u> <u>XXXXXX</u>	<u>ACCOUNT</u> <u>XXXXXXX</u>	<u>PROGRAM</u> <u>XXXX</u>	<u>PROJECT</u> <u>XXXXXXX</u>	<u>CURRENT</u> <u>BUDGET</u>	<u>REQUESTED</u> <u>REDUCTION</u> <small>(Rounded Up to \$10)</small>
Account 1	0001	114300	5120010	1116	0000000	2,190,120	100,000
Account 2	0001	301215	5110001	1569	0000000	492,360	95,000
Account 3	0001	301435	5820001	1565	0000000	3,436,180	5,700
Account 4							
Account 5							
Account 6							
Account 7							
Account 8							
Account 9							
Account 10							
Account 11							
Total						6,118,660	200,700

APPROPRIATION TO: Accounts & Amount to be increased

	<u>FUND</u> <u>XXXX</u>	<u>CENTER</u> <u>XXXXXX</u>	<u>ACCOUNT</u> <u>XXXXXXX</u>	<u>PROGRAM</u> <u>XXXX</u>	<u>PROJECT</u> <u>XXXXXXX</u>	<u>CURRENT</u> <u>BUDGET</u>	<u>REQUESTED</u> <u>INCREASE</u> <small>(Rounded Up to \$10)</small>
Account 1	0001	301113	5110001	1001	0000000	262,040	95,000
Account 2	0001	301436	5120010	1565	0000000	-73,870	45,000
Account 3	0001	301705	5820001	1580	0000000	1,872,040	5,700
Account 4	0001	301118	5120010	1001	0000000	-115,440	25,000
Account 5	0001	311113	5120010	1711	0000000	-108,570	30,000
Account 6							
Total						1,836,200	200,700

Budget Amendment Questions:

Please provide a concise answer to each of the following questions. If any questions are not applicable, enter N/A.

1. Why is this budget amendment required? Provide an explanation indicating why additional appropriation is required for each of the line items listed in the "APPROPRIATION TO" section.

Additional funds are needed in:

- 301118 – Business Services: increase in the amount of \$25,000 due to an overestimate of the Salary Attrition. While we do have two current vacancies in Business Services, we are actively recruiting and expect to have them filled by May. The double encumbrance for the Director position offset any savings associated with those two vacancies.
- 301113 – Administration, Coordination and Quality Assurance: increase in the amount of \$30,000. The Behavioral Data Scientist payroll costing was changed from the Health Program CC 301215, PM 1569 to the Admin CC 301113, PM 1001 effective December 18. The budget for this position is in the Health Program CC 301215, PM 1569. Request reclassification of budget from Health Program to Admin.
- 301436 – Homeless Prevention and Self-Sufficiency: increase in the amount of \$45,000. This is from two accounts - The Salary attrition of \$73,870 is artificially reducing the budget and the FHAP program is fully staffed. No salary savings are expected.
- 311113 – Consumer Protection: increase in the amount of \$30,000 out of the salary attrition and an intern.
- 301705 – Matching and Pass-Thru Grants: increase in the amount of \$5,700. This portion of the Social Action Funding budget was included in the Homeless Initiative CC 301435 in error. Requesting reclassification of the budget from 301435 to 301705.

2. Why are funds available for realignment? Provide an explanation indicating why funds are available for each of the line items listed in the "APPROPRIATION FROM" section.

Funds are available in the 301215 cost center due to the shifting the Behavioral Scientist position to the Admin cost center 301113. Funds are available in the 301435 cost center as a small amount was erroneously budgeted in 301435 that should have gone to 301705. Additionally, funds are available in Reserves due to State Statute and in General Government for Personnel Attrition.

3. Is this amendment related to a previous Board action? (i.e. change order, contract approval, etc.) If so, please indicate the type of action and date approved.

No

4. For requests submitted after the new year budget development process, is this amendment consistent with the current year 9/30 projections provided in the budget?

Yes

5. If the amendment is related to the Capital Improvement Program, is this consistent with the multi-year plan and how will it affect current or future year plans?

N/A

6. If this request is submitted by anyone other than the Department Director, please confirm this amendment has (Type name of Director and date approved)

Karen Yatchum 04/09/2024

BOARD BUDGET AMENDMENT REQUEST FORM

Please type in the green boxes.

Name of the Person submitting the request: Krishna Gandhi on behalf of Jodie Sechler
 Telephone Extension: 22526

APPROPRIATION FROM: Accounts & Amount to be reduced

	<u>FUND</u> <u>XXXX</u>	<u>CENTER</u> <u>XXXXXX</u>	<u>ACCOUNT</u> <u>XXXXXXXX</u>	<u>PROGRAM</u> <u>XXXX</u>	<u>PROJECT</u> <u>XXXXXXXX</u>	<u>CURRENT</u> <u>BUDGET</u>	<u>REQUESTED</u> <u>REDUCTION</u> <small>(Rounded Up to \$10)</small>
Account 1	0001	114300	5120010	1116	0000000	2,190,120	60,000
Account 2	1006	344110	5996000	1008	0000000	26,592,250	962,500
Account 3	1006	344310	5996000	1008	0000000	26,592,250	962,500
Account 4	1050	345265	5996000	1008	0000000	314,730	100,000
Account 5							
Account 6							
Account 7							
Account 8							
Account 9							
Account 10							
Total						55,689,350	2,085,000

APPROPRIATION TO: Accounts & Amount to be increased

	<u>FUND</u> <u>XXXX</u>	<u>CENTER</u> <u>XXXXXX</u>	<u>ACCOUNT</u> <u>XXXXXXXX</u>	<u>PROGRAM</u> <u>XXXX</u>	<u>PROJECT</u> <u>XXXXXXXX</u>	<u>CURRENT</u> <u>BUDGET</u>	<u>REQUESTED</u> <u>INCREASE</u> <small>(Rounded Up to \$10)</small>
Account 1	0001	342120	5120010	1824	0000000	-158,880	60,000
Account 2	1006	344110	5340002	1815	0000000	70,338,580	1,925,000
Account 3	1050	345265	5460001	1821	0000000	163,320	100,000
Account 4							
Account 5							
Account 6							
Account 7							
Account 8							
Account 9							
Account 10							
Total						70,343,020	2,085,000

Budget Amendment Questions:

Please provide a concise answer to each of the following questions. If any questions are not applicable, enter N/A.

1. Why is this budget amendment required? Provide an explanation indicating why additional appropriation is required for each of the line items listed in the "APPROPRIATION TO" section.

Radio General Fund - the salary attrition savings for FY24 was overbudgeted and will cause the FY24 budget to fail funds. The FY24 personnel services budget of \$743,870 is lower than the FY23 personnel services actual of \$773,696.

EMS Fund - Based on current ambulance contractor expense projections, the 5340002 Ambulance Contract is expected to have a budget shortfall, Reserves are being reduced to offset the increase.

Tierra Verde Fire District - Due to unforeseen repairs to fire station 21 repairs (concrete work in the bay, interior painting, siding-wood repairs) and engine repairs (bearing and oil leak).

2. Why are funds available for realignment? Provide an explanation indicating why funds are available for each of the line items listed in the "APPROPRIATION FROM" section.

Funds are available in the FY24 Contingency Reserve, in accordance with Florida Statutes.

3. Is this amendment related to a previous Board action? (i.e. change order, contract approval, etc.) If so, please indicate the type of action and date approved.

No

4. For requests submitted after the new year budget development process, is this amendment consistent with the current year 9/30 projections provided in the budget?

Yes

5. If the amendment is related to the Capital Improvement Program, is this consistent with the multi-year plan and how will it affect current or future year plans?

N/A

6. If this request is submitted by anyone other than the Department Director, please confirm this amendment has (Type name of Director and date approved)

Krishna Gandhi on behalf of Jodie Sechler

BOARD BUDGET AMENDMENT REQUEST FORM

Please type in the green boxes.

Name of the Person submitting the request: Charlie Jenkins
 Telephone Extension: 44392

APPROPRIATION FROM: Accounts & Amount to be reduced

	FUND <small>XXXX</small>	CENTER <small>XXXXXX</small>	ACCOUNT <small>XXXXXXXX</small>	PROGRAM <small>XXXX</small>	PROJECT <small>XXXXXXXX</small>	CURRENT BUDGET	REQUESTED REDUCTION <small>(Rounded Up to \$10)</small>
Account 1	0001	114100	5995010	1008	0000000	101,829,310	443,740
Account 2							
Account 3							
Account 4							
Account 5							
Account 6							
Account 7							
Account 8							
Account 9							
Account 10							
Total						101,829,310	443,740

APPROPRIATION TO: Accounts & Amount to be increased

	FUND <small>XXXX</small>	CENTER <small>XXXXXX</small>	ACCOUNT <small>XXXXXXXX</small>	PROGRAM <small>XXXX</small>	PROJECT <small>XXXXXXXX</small>	CURRENT BUDGET	REQUESTED INCREASE <small>(Rounded Up to \$10)</small>
Account 1	0001	361410	5440001	1902	0000000	5,439,670	180,000
Account 2	0001	361525	5460001	1903	0000000	1,300,450	40,000
Account 3	0001	361540	5460001	1882	0000000	1,281,860	223,740
Account 4							
Account 5							
Account 6							
Account 7							
Account 8							
Account 9							
Account 10							
Account 11							
Total						8,021,980	443,740

Budget Amendment Questions:

Please provide a concise answer to each of the following questions. If any questions are not applicable, enter N/A.

1. Why is this budget amendment required? Provide an explanation indicating why additional appropriation is required for each of the line items listed in the "APPROPRIATION TO" section.

This amendment is required due to various emergency repairs and projects that are not budgeted for, but are in need of attention.

2. Why are funds available for realignment? Provide an explanation indicating why funds are available for each of the line items listed in the "APPROPRIATION FROM" section.

Funds are available in the FY24 Contingency Reserve, in accordance with Florida Statutes.

3. Is this amendment related to a previous Board action? (i.e. change order, contract approval, etc.) If so, please indicate the type of action and date approved.

No

4. For requests submitted after the new year budget development process, is this amendment consistent with the current year 9/30 projections provided in the budget?

Yes

5. If the amendment is related to the Capital Improvement Program, is this consistent with the multi-year plan and how will it affect current or future year plans?

N/A

6. If this request is submitted by anyone other than the Department Director, please confirm this amendment has been (Type name of Director and date approved)

Joe Lauro May 1, 2024

BOARD BUDGET AMENDMENT REQUEST FORM

Please type in the green boxes.

Name of the Person submitting the request: Veronica Ettel
 Telephone Extension: 418-6929

APPROPRIATION FROM: Accounts & Amount to be reduced

	FUND XXXX	CENTER XXXXXX	ACCOUNT XXXXXXXX	PROGRAM XXXX	PROJECT XXXXXXXX	CURRENT BUDGET	REQUESTED REDUCTION <small>(Rounded Up to \$10)</small>
Account 1	0001	601110	5120001	6011	0000000	335,220	23,200
Account 2	0001	601110	5210001	6011	0000000	25,370	1,780
Account 3	0001	601110	5220001	6011	0000000	45,300	3,020
Account 4							
Account 5							
Account 6							
Account 7							
Account 8							
Account 9							
Account 10							
Total						405,890	28,000

APPROPRIATION TO: Accounts & Amount to be increased

	FUND XXXX	CENTER XXXXXX	ACCOUNT XXXXXXXX	PROGRAM XXXX	PROJECT XXXXXXXX	CURRENT BUDGET	REQUESTED INCREASE <small>(Rounded Up to \$10)</small>
Account 1	0001	601130	5120001	6002	0000000	101,080	4,200
Account 2	0001	601130	5210001	6002	0000000	7,650	320
Account 3	0001	601130	5220001	6002	0000000	13,640	550
Account 4	0001	601140	5120001	6003	0000000	268,460	10,000
Account 5	0001	601140	5210001	6003	0000000	20,240	770
Account 6	0001	601140	5220001	6003	0000000	36,180	1,300
Account 7	0001	601140	5120001	6004	0000000	271,960	9,000
Account 8	0001	601140	5210001	6004	0000000	20,580	690
Account 9	0001	601140	5220001	6004	0000000	41,840	1,170
Account 10							
Total						781,630	28,000

Budget Amendment Questions:

Please provide a concise answer to each of the following questions. If any questions are not applicable, enter N/A.

1. Why is this budget amendment required? Provide an explanation indicating why additional appropriation is required for each of the line items listed in the "APPROPRIATION TO" section.

The Judiciary is requesting a total of \$28,000.00 be realigned from the Court Counsel/Administration cost center to three other cost centers within the FY24 Adopted Judiciary budget. The intra-agency budget transfer enables the Judiciary to achieve pay equity for County employees with adjustments to match State pay increases. The adjustments are needed to address staff retention.

2. Why are funds available for realignment? Provide an explanation indicating why funds are available for each of the line items listed in the "APPROPRIATION FROM" section.

Funds are available due to salary savings accrued from vacant positions when staff turns over.

3. Is this amendment related to a previous Board action? (i.e. change order, contract approval, etc.) If so, please indicate the type of action and date approved.

No

4. For requests submitted after the new year budget development process, is this amendment consistent with the current year 9/30 projections provided in the budget?

General Government - No

Judiciary - No

5. If the amendment is related to the Capital Improvement Program, is this consistent with the multi-year plan and how will it affect current or future year plans?

n/a

6. If this request is submitted by anyone other than the Department Director, please confirm this amendment has been reviewed and approved by your Director.

(Type name of Director and date approved)

Inass Riyad for Jennifer Parker, and Judge Shawn Crane

BOARD BUDGET AMENDMENT REQUEST FORM

Please type in the green boxes.

Name of the Person submitting the request: Danielle Holland
 Telephone Extension: 43293

APPROPRIATION FROM: Accounts & Amount to be reduced

	<u>FUND</u> XXXX	<u>CENTER</u> XXXXXX	<u>ACCOUNT</u> XXXXXXX	<u>PROGRAM</u> XXXX	<u>PROJECT</u> XXXXXXX	<u>CURRENT</u> <u>BUDGET</u>	<u>REQUESTED</u> <u>REDUCTION</u> <small>(Rounded Up to \$10)</small>
Account 1	0001	114100	5995010	1008	0000000	101,829,310	117,280
Account 2							
Account 3							
Account 4							
Account 5							
Account 6							
Account 7							
Account 8							
Account 9							
Account 10							
Total						101,829,310	117,280

APPROPRIATION TO: Accounts & Amount to be increased

	<u>FUND</u> XXXX	<u>CENTER</u> XXXXXX	<u>ACCOUNT</u> XXXXXXX	<u>PROGRAM</u> XXXX	<u>PROJECT</u> XXXXXXX	<u>CURRENT</u> <u>BUDGET</u>	<u>REQUESTED</u> <u>INCREASE</u> <small>(Rounded Up to \$10)</small>
Account 1	0001	661116	5110001	7079	0000000	134,180	18,750
Account 2	0001	661116	5340001	7079	0000000	4,000	13,180
Account 3	0001	661117	5110001	7079	0000000	239,750	22,490
Account 4	0001	661117	5340001	7079	0000000	4,000	15,700
Account 5	0001	661119	5110001	7079	0000000	692,840	33,740
Account 6	0001	661119	5340001	7079	0000000	0	13,420
Account 7							
Account 8							
Account 9							
Account 10							
Total						1,074,770	117,280

Budget Amendment Questions:

Please provide a concise answer to each of the following questions. If any questions are not applicable, enter N/A.

1. Why is this budget amendment required? Provide an explanation indicating why additional appropriation is required for each of the line items listed in the "APPROPRIATION TO" section.

Increased fund balance due to FY24 budget creation was completed when previous director was in place. The unanticipated hiring of a new Chief HR Officer, recruitment costs, and the double encumbrance of the interim director through 6/1/2024. Increase is also due to unbudgeted agreements for Salary.com and Contact Monkey. The interim director approved agreements to be paid utilizing end of year savings in FY23. Due to the agreements primarily covering FY24, Finance required that they be charged to FY24 budget instead of FY23. These agreements were not budgeted in FY24 because budget adoption had already taken place once HR learned that the cost of the agreement needed to shift to FY24. Human Resources is able to leverage \$ 45,140 in lapse savings to offset the unanticipated personnel services for the interim director and newly appointed Chief HR Officer.

Increased Executive Salary lines as guided by OMB with cost calculation and based on allocation. Increased Other Contractual Services lines based on the recruitment for the Chief HR Officer to cost center 661117, Salary.com agreement to cost center 661119, and the contract monkey agreement to cost center 661116.

2. Why are funds available for realignment? Provide an explanation indicating why funds are available for each of the line items listed in the "APPROPRIATION FROM" section.

Funds are available in the FY24 Contingency Reserve, in accordance with Florida Statutes.

3. Is this amendment related to a previous Board action? (i.e. change order, contract approval, etc.) If so, please indicate the type of action and date approved.

No

4. For requests submitted after the new year budget development process, is this amendment consistent with the current year 9/30 projections provided in the budget?

Yes

5. If the amendment is related to the Capital Improvement Program, is this consistent with the multi-year plan and how will it affect current or future year plans?

N/A

6. If this request is submitted by anyone other than the Department Director, please confirm this amendment has (Type name of Director and date approved)

Wade Childress 4/10/2024

BOARD BUDGET AMENDMENT REQUEST FORM

Please type in the green boxes.

Name of the Person submitting the request: Veronica Ettel on behalf of Dacia Wright (Clerk's Office)
 Telephone Extension: 418-6929

APPROPRIATION FROM: Accounts & Amount to be reduced

	<u>FUND</u> <u>XXXX</u>	<u>CENTER</u> <u>XXXXXX</u>	<u>ACCOUNT</u> <u>XXXXXXXX</u>	<u>PROGRAM</u> <u>XXXX</u>	<u>PROJECT</u> <u>XXXXXXXX</u>	<u>CURRENT</u> <u>BUDGET</u>	<u>REQUESTED</u> <u>REDUCTION</u> <small>(Rounded Up to \$10)</small>
Account 1	0001	114100	5995010	1008	0000000	101,829,310	450,000
Account 2							
Account 3							
Account 4							
Account 5							
Account 6							
Account 7							
Account 8							
Account 9							
Account 10							
Total						101,829,310	450,000

APPROPRIATION TO: Accounts & Amount to be increased

	<u>FUND</u> <u>XXXX</u>	<u>CENTER</u> <u>XXXXXX</u>	<u>ACCOUNT</u> <u>XXXXXXXX</u>	<u>PROGRAM</u> <u>XXXX</u>	<u>PROJECT</u> <u>XXXXXXXX</u>	<u>CURRENT</u> <u>BUDGET</u>	<u>REQUESTED</u> <u>INCREASE</u> <small>(Rounded Up to \$10)</small>
Account 1	0001	950001	5919951	9850	0000000	15,437,990	450,000
Account 2							
Account 3							
Account 4							
Account 5							
Account 6							
Account 7							
Account 8							
Account 9							
Account 10							
Total						15,437,990	450,000

Budget Amendment Questions:

Please provide a concise answer to each of the following questions. If any questions are not applicable, enter N/A.

1. Why is this budget amendment required? Provide an explanation indicating why additional appropriation is required for each of the line items listed in the "APPROPRIATION TO" section.

The Clerk of Courts requests a Budget Amendment for \$825,000 due to another challenging fiscal year for Recording revenue. The \$825,000 approved by the Board was unused in FY23 and returned at year-end due to cost-saving measures taken in FY23. In FY24, no additional cost-saving measures can be taken to reduce expenditures without severely impacting the Clerk's statutory duties as they relate to Recording. While revenues have decreased due to economic conditions, expenditures have increased. Employer FRS contributions, employer-borne health insurance costs, and the impact of FY24 salary increases have substantially increased costs. In regard to FY24 salary increases, the alternative minimum wage for classified employees was raised from \$15 to \$18 an hour, including compression, a 4.5% general increase, and a \$600 incentive have all had major expenditure impacts. The following cost cutting measures were applied in FY23 and have continued in FY24: 1) Hiring freeze for non-critical positions. 2) FTE were reallocated to other funds until revenue improves. 3) All Recording technology costs, including FTE and Operating expenditures were reallocated to other funds. The savings to 1503 in OPEX and CAPEX is estimated at 1.3M. Justification includes: Excess Fee Remittances to the Board over the last 10 years have totaled \$8.9 million, less FY22 Board Resolution of \$1.35 million (net total \$7.55 million). \$4 million of that was from the Recorder's Fund. Clerk did go to the State, requesting subsidy for the gap and was not approved at the full amount.

2. Why are funds available for realignment? Provide an explanation indicating why funds are available for each of the line items listed in the "APPROPRIATION FROM" section.

Funds are available in the FY24 General Government Contingency Reserve, in accordance with Florida Statutes.

3. Is this amendment related to a previous Board action? (i.e. change order, contract approval, etc.) If so, please indicate the type of action and date approved.

N/A

4. For requests submitted after the new year budget development process, is this amendment consistent with the current year 9/30 projections provided in the budget?

No

5. If the amendment is related to the Capital Improvement Program, is this consistent with the multi-year plan and how will it affect current or future year plans?

N/A

6. If this request is submitted by anyone other than the Department Director, please confirm this amendment has (Type name of Director and date approved)

Ken Burke

UNANTICIPATED RECEIPT OF FUNDS (I.E. FUND BAL) BGT AMENDMENT REQUEST

Please type in the green boxes.

Name of the Person submitting the request: Veronica Ettel on behalf Property Appraiser

Telephone Extension: 418-6929

APPROPRIATION FROM: Accounts & Amount to be reduced

	FUND XXXX	CENTER XXXXXX	ACCOUNT XXXXXXX	PROGRAM XXXX	PROJECT XXXXXXX	CURRENT BUDGET	REQUESTED REDUCTION <small>(Rounded Up to \$10)</small>
Account 1&2	0001	114100	5996010	1008	0000000	66,045,670	-33,100
Account 3	1002	302010	5996000	1008	0000000	2,221,990	-200
Account 4	1006	344310	5996000	1008	0000000	26,592,240	-1,800
Account 5	1014	681110	5995000	1008	0000000	492,910	-200
Account 6	1050	345215	5996000	1008	0000000	400,690	-100
Account 7	1050	345220	5996000	1008	0000000	2,448,540	-100
Account 8	1050	345225	5996000	1008	0000000	498,700	-100
Account 9	1050	345230	5996000	1008	0000000	58,860	-100
Account 10	1050	345235	5996000	1008	0000000	1,659,370	-100
Account 11	1050	345240	5996000	1008	0000000	73,530	-100
Account 12	1050	345245	5996000	1008	0000000	142,260	-100
Account 13	1050	345250	5996000	1008	0000000	297,130	-100
Account 14	1050	345255	5996000	1008	0000000	150,050	-200
Account 15	1050	345260	5996000	1008	0000000	1,682,270	-100
Account 16	1050	345265	5996000	1008	0000000	314,730	-100
Account 17	1050	345270	5996000	1008	0000000	45,580	-100
Account 18	1081	691151	5995000	1008	0000000	78,200	-100
Account 19	1081	691152	5995000	1008	0000000	78,200	-100
Account 20	1082	691110	5995000	1008	0000000	36,010	-100
Account 21	1083	691153	5995000	1008	0000000	47,220	-100
Account 22	1084	691154	5995000	1008	0000000	47,220	-100
Total						103,411,370	-37,100

APPROPRIATION TO: Accounts & Amount to be increased

	FUND XXXX	CENTER XXXXXX	ACCOUNT XXXXXXX	PROGRAM XXXX	PROJECT XXXXXXX	CURRENT BUDGET	REQUESTED INCREASE <small>(Rounded Up to \$10)</small>
Account 1	0001	960001	5919962	9860	0000000	371,490	1,000
Account 2	0001	960001	5919960	9860	0000000	12,318,710	32,100
Account 3	1002	302010	5919960	9860	0000000	62,820	200
Account 4	1006	344310	5919960	9860	0000000	664,620	1,800
Account 5	1014	681110	5919960	9860	0000000	54,930	200
Account 6	1050	345215	5919960	9860	0000000	4,860	100
Account 7	1050	345220	5919960	9860	0000000	26,930	100
Account 8	1050	345225	5919960	9860	0000000	6,850	100
Account 9	1050	345230	5919960	9860	0000000	560	100
Account 10	1050	345235	5919960	9860	0000000	17,330	100
Account 11	1050	345240	5919960	9860	0000000	7,740	100
Account 12	1050	345245	5919960	9860	0000000	1,450	100
Account 13	1050	345250	5919960	9860	0000000	4,630	100
Account 14	1050	345255	5919960	9860	0000000	47,450	200
Account 15	1050	345260	5919960	9860	0000000	19,360	100
Account 16	1050	345265	5919960	9860	0000000	18,300	100
Account 17	1050	345270	5919960	9860	0000000	470	100
Account 18	1081	691151	5919960	9860	0000000	10,700	100
Account 19	1081	691152	5919960	9860	0000000	10,700	100
Account 20	1082	691110	5919960	9860	0000000	2,060	100
Account 21	1083	691153	5919960	9860	0000000	6,580	100
Account 22	1084	691154	5919960	9860	0000000	6,580	100
Total						13,665,120	37,100

Budget Amendment Questions:

Please provide a concise answer to each of the following questions. If any questions are not applicable, enter N/A.

1. What was the cause of unanticipated fund balance? Include specific explanation of whether increased prior year revenues or decreased prior year expenditures caused the increase in fund balance and why these were not anticipated.

N/A

2. Provide a detailed explanation for the re-appropriation of funds for the line items listed in the "APPROPRIATION TO" section.

This request is for the incremental difference between the original Property Appraiser's submitted budget, as presented to the BCC in July 2023 and the final State approved budget, as amended after BCC adoption of the FY24 Budget in September.

3. If this request is submitted by anyone other than the Department Director, please confirm this amendment has (Type name of Director and date approved)

Property Appraiser - Mike Twitty

BOARD BUDGET AMENDMENT REQUEST FORM

Please type in the green boxes.

Name of the Person submitting the request: Belinda Amundson
 Telephone Extension: 44210

APPROPRIATION FROM: Accounts & Amount to be reduced

	<u>FUND</u> <u>XXXX</u>	<u>CENTER</u> <u>XXXXXX</u>	<u>ACCOUNT</u> <u>XXXXXXX</u>	<u>PROGRAM</u> <u>XXXX</u>	<u>PROJECT</u> <u>XXXXXXX</u>	<u>CURRENT</u> <u>BUDGET</u>	<u>REQUESTED</u> <u>REDUCTION</u> <small>(Rounded Up to \$10)</small>
Account 1	0001	114100	5997000	1008	0000000	6,530,000	2,652,030
Account 2							
Account 3							
Account 4							
Account 5							
Account 6							
Account 7							
Account 8							
Account 9							
Account 10							
Total						6,530,000	2,652,030

APPROPRIATION TO: Accounts & Amount to be increased

	<u>FUND</u> <u>XXXX</u>	<u>CENTER</u> <u>XXXXXX</u>	<u>ACCOUNT</u> <u>XXXXXXX</u>	<u>PROGRAM</u> <u>XXXX</u>	<u>PROJECT</u> <u>XXXXXXX</u>	<u>CURRENT</u> <u>BUDGET</u>	<u>REQUESTED</u> <u>INCREASE</u> <small>(Rounded Up to \$10)</small>
Account 1	0001	970001	5919976	9870	0000000	505,030	2,652,030
Account 2							
Account 3							
Account 4							
Account 5							
Account 6							
Account 7							
Account 8							
Account 9							
Account 10							
Total						505,030	2,652,030

Budget Amendment Questions:

Please provide a concise answer to each of the following questions. If any questions are not applicable, enter N/A.

1. Why is this budget amendment required? Provide an explanation indicating why additional appropriation is required for each of the line items listed in the "APPROPRIATION TO" section.

The Supervisor of Elections (SOE) is requesting \$2,652,030 for the purchase of 478 DS300 voting tabulators. These units have already been purchased and used for the March 2024 election. The new units replaced the department's DS200 units which had reached end of life (15+ years) and were no longer supported. SOE will receive an early payment discount offer to save 2.5% on this purchase if payment is received by the vendor on or before June 30, 2024. The full price of the units, without the discount, is \$2,720,025.

2. Why are funds available for realignment? Provide an explanation indicating why funds are available for each of the line items listed in the "APPROPRIATION FROM" section.

Funds are available in reserves per statute.

3. Is this amendment related to a previous Board action? (i.e. change order, contract approval, etc.) If so, please indicate the type of action and date approved.

No.

4. For requests submitted after the new year budget development process, is this amendment consistent with the current year 9/30 projections provided in the budget?

5. If the amendment is related to the Capital Improvement Program, is this consistent with the multi-year plan and how will it affect current or future year plans?

N/A

6. If this request is submitted by anyone other than the Department Director, please confirm this amendment has been (Type name of Director and date approved)

BOARD BUDGET AMENDMENT REQUEST FORM

Please type in the green boxes.

Name of the Person submitting the request: Shane Kunze
 Telephone Extension: 44599

APPROPRIATION FROM: Accounts & Amount to be reduced

	FUND <u>XXXX</u>	CENTER <u>XXXXXX</u>	ACCOUNT <u>XXXXXXXX</u>	PROGRAM <u>XXXX</u>	PROJECT <u>XXXXXXXX</u>	CURRENT BUDGET	REQUESTED REDUCTION <small>(Rounded Up to \$10)</small>
Account 1	0001	114100	5995010	1008	0000000	101,829,310	200,000
Account 2	0001	301330	5340001	1569	0000000	4,618,410	60,100
Account 3							
Account 4							
Account 5							
Account 6							
Account 7							
Account 8							
Account 9							
Account 10							
Total						106,447,720	260,100

APPROPRIATION TO: Accounts & Amount to be increased

	FUND <u>XXXX</u>	CENTER <u>XXXXXX</u>	ACCOUNT <u>XXXXXXXX</u>	PROGRAM <u>XXXX</u>	PROJECT <u>XXXXXXXX</u>	CURRENT BUDGET	REQUESTED INCREASE <small>(Rounded Up to \$10)</small>
Account 1	0001	990001	5919991	9890	0000000	338,221,110	60,100
Account 2	0001	990001	5919993	9890	0000000	54,376,370	200,000
Account 3							
Account 4							
Account 5							
Account 6							
Account 7							
Account 8							
Account 9							
Account 10							
Total						392,597,480	260,100

Budget Amendment Questions:

Please provide a concise answer to each of the following questions. If any questions are not applicable, enter N/A.

1. Why is this budget amendment required? Provide an explanation indicating why additional appropriation is required for each of the line items listed in the "APPROPRIATION TO" section.

The realignment of \$60,100.00 will allow the Sheriff to hire two case managers at Safe Harbor due to the Camping in Public Law recently signed by the Governor. Additionally, realignment of \$200,000.00 from Reseres will allow needed funding for evidence storage.

2. Why are funds available for realignment? Provide an explanation indicating why funds are available for each of the line items listed in the "APPROPRIATION FROM" section.

Funding is available in Human Services due to the discontinuation of PCET during FY24. Additionally, funds are available in the FY24 Contingency Reserve, in accordance with Florida Statutes.

3. Is this amendment related to a previous Board action? (i.e. change order, contract approval, etc.) If so, please indicate the type of action and date approved.

No

4. For requests submitted after the new year budget development process, is this amendment consistent with the current year 9/30 projections provided in the budget?

Yes

5. If the amendment is related to the Capital Improvement Program, is this consistent with the multi-year plan and how will it affect current or future year plans?

N/A

6. If this request is submitted by anyone other than the Department Director, please confirm this amendment has (Type name of Director and date approved)

Chris Rose May 2, 2024

BOARD BUDGET AMENDMENT REQUEST FORM

Please type in the green boxes.

Name of the Person submitting the request: Teri Tuxhorn
 Telephone Extension: 47465

APPROPRIATION FROM: Accounts & Amount to be reduced

	FUND XXXX	CENTER XXXXXX	ACCOUNT XXXXXXXX	PROGRAM XXXX	PROJECT XXXXXXXX	CURRENT BUDGET	REQUESTED REDUCTION (Rounded Up to \$10)
Account 1	1040	381120	5995000	1008	0000000	26,812,880	6,000,000
Account 2	1040	381120	5997004	1008	0000000	109,240,440	395,000
Account 3							
Account 4							
Account 5							
Account 6							
Account 7							
Account 8							
Account 9							
Account 10							
Total						136,053,320	6,395,000

APPROPRIATION TO: Accounts & Amount to be increased

	FUND XXXX	CENTER XXXXXX	ACCOUNT XXXXXXXX	PROGRAM XXXX	PROJECT XXXXXXXX	CURRENT BUDGET	REQUESTED INCREASE (Rounded Up to \$10)
Account 1	1040	381260	5481100	1997	0000000	15,865,000	4,500,000
Account 2	1040	381234	5480003	1997	0000000	6,000,000	1,500,000
Account 3	1040	381210	5311031	1989	0000000	0	395,000
Account 4							
Account 5							
Account 6							
Account 7							
Account 8							
Account 9							
Account 10							
Total						21,865,000	6,395,000

Budget Amendment Questions:

Please provide a concise answer to each of the following questions. If any questions are not applicable, enter N/A.

1. Why is this budget amendment required? Provide an explanation indicating why additional appropriation is required for each of the line items listed in the "APPROPRIATION TO" section.

Visit St. Pete/Clearwater (VSPC) studies key markets to measure the impact of our marketing over a period of the year. Our most recent survey included 4,400 travelers across 14 different markets. 70% of respondents said VSPC ads impacted their decision to visit. The ROI analysis concluded that \$6.5 million in marketing investments from late fall 2022 to early spring 2023 generated \$165 million in direct visitor spending. This equates to an ROI of \$27.5 to \$1.

•Visitors from out of state have dropped as a percentage of total visitors between 2019 and 2023

•In 2019 68% of US visitors were from outside Florida, in 2023 it was 56%.

oThe declines were seen across our core out of state markets.

2023	2019
Ohio	5%7%
New York	4%6%
Michigan	4%4%
Illinois	3%4%
Pennsylvania	3%4%

•Out of state visitors spend on average 8% more and stay twice as long in destination as Floridians.

oAn out of state visitor is worth 2.3x more in economic impact to the County.

	Daily Spend	Avg Nights	Value per Visitor
Florida	\$384.52	2.5	\$961

Out of State \$416.31 5.4 \$2,248

•Media costs increased 3.3% from 2022 to 2023 and 3.1% from 2023 to 2024. *

Increased costs mean less reach with the media dollars spent in current markets and no presence the NY DMA.

•Without increasing Visit St. Pete/Clearwater marketing budgets we should expect a continued decline in the percentage of the out of state visitors and overall economic impact to the County.

Additionally, CVB needs additional appropriations to allow engagement with Disclosure Counsel (\$170,000) and Bond Counsel (\$225,000) for the potential St. Petersburg Major League Baseball Stadium project.

2. Why are funds available for realignment? Provide an explanation indicating why funds are available for each of the line items listed in the "APPROPRIATION FROM" section.

Funds are available due to unanticipated fund balance in the Tourist Development Tax Fund.

3. Is this amendment related to a previous Board action? (i.e. change order, contract approval, etc.) If so, please indicate the type of action and date approved.

N/A

4. For requests submitted after the new year budget development process, is this amendment consistent with the current year 9/30 projections provided in the budget?

The \$6.0M amendment was included in the FY25 budget as a Decision Package for inclusion in the FY24 and future budgets.

5. If the amendment is related to the Capital Improvement Program, is this consistent with the multi-year plan and how will it affect current or future year plans?

N/A

6. If this request is submitted by anyone other than the Department Director, please confirm this amendment has (Type name of Director and date approved)

Brian Lowack, approved on 4/4/24

BOARD BUDGET AMENDMENT REQUEST FORM

Please type in the green boxes.

Name of the Person submitting the request: Cassie Hartman
 Telephone Extension: 7529

APPROPRIATION FROM: Accounts & Amount to be reduced

	<u>FUND</u> <u>XXXX</u>	<u>CENTER</u> <u>XXXXXX</u>	<u>ACCOUNT</u> <u>XXXXXXX</u>	<u>PROGRAM</u> <u>XXXX</u>	<u>PROJECT</u> <u>XXXXXXX</u>	<u>CURRENT</u> <u>BUDGET</u>	<u>REQUESTED</u> <u>REDUCTION</u> <small>(Rounded Up to \$10)</small>
Account 1	1093	432910	5995000	1008	0000000	17,680	2,320
Account 2							
Account 3							
Account 4							
Account 5							
Account 6							
Account 7							
Account 8							
Account 9							
Account 10							
Total						17,680	2,320

APPROPRIATION TO: Accounts & Amount to be increased

	<u>FUND</u> <u>XXXX</u>	<u>CENTER</u> <u>XXXXXX</u>	<u>ACCOUNT</u> <u>XXXXXXX</u>	<u>PROGRAM</u> <u>XXXX</u>	<u>PROJECT</u> <u>XXXXXXX</u>	<u>CURRENT</u> <u>BUDGET</u>	<u>REQUESTED</u> <u>INCREASE</u> <small>(Rounded Up to \$10)</small>
Account 1	1093	432910	5919980	9880	0000000	30,920	2,320
Account 2							
Account 3							
Account 4							
Account 5							
Account 6							
Account 7							
Account 8							
Account 9							
Account 10							
Total						30,920	2,320

Budget Amendment Questions:

Please provide a concise answer to each of the following questions. If any questions are not applicable, enter N/A.

1. Why is this budget amendment required? Provide an explanation indicating why additional appropriation is required for each of the line items listed in the "APPROPRIATION TO" section.

Lealman Solid Waste Collection and Disposal Assessment. Increased revenue collection resulted in increased fees due to Tax collector.

2. Why are funds available for realignment? Provide an explanation indicating why funds are available for each of the line items listed in the "APPROPRIATION FROM" section.

Funds are available in the FY24 Contingency Reserve, in accordance with Florida Statutes.

3. Is this amendment related to a previous Board action? (i.e. change order, contract approval, etc.) If so, please indicate the type of action and date approved.

No

4. For requests submitted after the new year budget development process, is this amendment consistent with the current year 9/30 projections provided in the budget?

Yes

5. If the amendment is related to the Capital Improvement Program, is this consistent with the multi-year plan and how will it affect current or future year plans?

N/A

6. If this request is submitted by anyone other than the Department Director, please confirm this amendment has (Type name of Director and date approved)

Paul Sacco - 04/11/2024

UNANTICIPATED RECEIPT OF FUNDS (I.E. FUND BAL) BGT AMENDMENT REQUEST

Please type in the green boxes.

Name of the Person submitting the request: Danielle Holland
 Telephone Extension: 43293

APPROPRIATION FROM: Accounts & Amount to be reduced

	<u>FUND</u> <u>XXXX</u>	<u>CENTER</u> <u>XXXXXX</u>	<u>ACCOUNT</u> <u>XXXXXXXX</u>	<u>PROGRAM</u> <u>XXXX</u>	<u>PROJECT</u> <u>XXXXXXXX</u>	<u>CURRENT</u> <u>BUDGET</u>	<u>REQUESTED</u> <u>REDUCTION</u> <small>(Rounded Up to \$10)</small>
Account 1	5006	662110	5995000	1008	0000000	6,989,410	1,300,000
Account 2							
Account 3							
Account 4							
Account 5							
Account 6							
Account 7							
Account 8							
Account 9							
Account 10							
Total						6,989,410	1,300,000

APPROPRIATION TO: Accounts & Amount to be increased

	<u>FUND</u> <u>XXXX</u>	<u>CENTER</u> <u>XXXXXX</u>	<u>ACCOUNT</u> <u>XXXXXXXX</u>	<u>PROGRAM</u> <u>XXXX</u>	<u>PROJECT</u> <u>XXXXXXXX</u>	<u>CURRENT</u> <u>BUDGET</u>	<u>REQUESTED</u> <u>INCREASE</u> <small>(Rounded Up to \$10)</small>
Account 1	5006	662110	5231101	7076	0000000	57,072,640	409,240
Account 2	5006	662110	5231102	7076	0000000	2,289,470	799,730
Account 3	5006	662110	5340008	7076	0000000	3,500,000	41,530
Account 4	5006	662110	5340001	7076	0000000	512,620	49,500
Account 5							
Account 6							
Account 7							
Account 8							
Account 9							
Account 10							
Total						63,374,730	1,300,000

Budget Amendment Questions:

Please provide a concise answer to each of the following questions. If any questions are not applicable, enter N/A.

1. What was the cause of unanticipated fund balance? Include specific explanation of whether increased prior year revenues or decreased prior year expenditures caused the increase in fund balance and why these were not anticipated.

Increased fund balance due to FY24 claims and admin cost increases as well as a dependent eligibility audit with the new benefits consultant. Employee Benefits Medicare Advantage coverage is budgeted at the full cost \$5,777,010 for FY24. Employee Benefits actual expenditures are projected to be well below this amount and is able to leverage \$2,996,600 from the Medicare Advantage in lapse savings to offset the unanticipated Medical and Dental claims and admin costs.

2. Provide a detailed explanation for the re-appropriation of funds for the line items listed in the "APPROPRIATION TO" section.

Increased medical claims, dental claims/admin, and medical admin account lines in the Employee Benefits cost center. Increased other contractual services account line to cover the newly acquired Gallagher Services Agreement - Dependent Eligibility Audit.

3. If this request is submitted by anyone other than the Department Director, please confirm this amendment has been (Type name of Director and date approved)

Wade Childress 4/10/2024

UNANTICIPATED RECEIPT OF FUNDS (I.E. GRANTS) BGT AMENDMENT REQUEST

Please type in the green boxes.

Name of the Person submitting the request: Clark Scott / Keri Vizandiou
 Telephone Extension: 48202

REVENUE: Unanticipated Revenue or Grant Proceeds (Accounts & Amount to be increased)

	FUND XXXX	CENTER XXXXXX	ACCOUNT XXXXXXXX	PROGRAM XXXX	PROJECT XXXXXXXX	CURRENT BUDGET	REQUESTED INCREASE (Rounded Up to \$10)
Account 1	0001	100200	3312001	1712	004465A	0	225,760
Account 2							
Account 3							
Account 4							
Account 5							
Account 6							
Account 7							
Account 8							
Account 9							
Account 10							

Total 0 225,760

EXPENDITURE: Appropriation (Accounts & Amount to be increased)

	FUND XXXX	CENTER XXXXXX	ACCOUNT XXXXXXXX	PROGRAM XXXX	PROJECT XXXXXXXX	CURRENT BUDGET	REQUESTED INCREASE (Rounded Up to \$10)
Account 1	0001	311112	5340001	1712	004465A	0	225,760
Account 2							
Account 3							
Account 4							
Account 5							
Account 6							
Account 7							
Account 8							
Account 9							
Account 10							

Total 0 225,760

Budget Amendment Questions:

Please provide a concise answer to each of the following questions. If any questions are not applicable, enter N/A.

1. What is this the title and purpose of the unanticipated funds or grant proceeds? Provide a summary explanation of the unanticipated funds or grant and the scope of work for which funding will be provided.
U.S. Department of Justice, Office of Justice Programs, FY 19 Opioid Affected Youth Initiative had an end date of September 30, 2023. Pinellas County was approved for a no cost extension through June 30, 2024 as all grant funds had not been expended by September 30, 2023. The grant period began October 1, 2019. The project faced substantial challenges with the launch occurring at the height of the Covid-19 pandemic in 2020.

2. Have funds from this source been received before? If yes, indicate when they were last received.
Yes, Pinellas County has received multiple grants from the Department of Justice over the years. A few of the current grants from DoJ include the FY21 Family Treatment Court Enhancement and the Adult Treatment Court-Aurora Expansion Project.

3. Is this amendment related to a previous Board action? If so, please indicate the type of action approved and the date approved.
Yes, original grant award was approved and executed on Granicus #19-1832A

4. Is the program/activity for which the unanticipated funds or grant award already appropriated within the Adopted Budget?
No.

PLEASE NOTE: IF AMENDMENT IS GRANT RELATED COMPLETE ALL THE FOLLOWING QUESTIONS. IF AMENDMENT IS NOT GRANT RELATED, PROCEED TO ITEM #12.

5. Who awarded the grant? Indicate if this is a federal, state or local agency. Include CFDA or CSFA number, if appropriate.
U.S. Department of Justice, Office of Justice Programs. CFDA 16.842

6. Is the grant a reimbursement grant?
Yes

7. What is the total time period of the grant? Include start and end dates.
Grant began 10/1/19 - extended to 9/30/23. Additional No cost extension to a fourth year ending 9/30/24.

8. What is the total amount of the grant? Will all funds be received in the current fiscal year? If the grant period extends beyond the current fiscal year, indicate the amount anticipated to be received within the current fiscal year and in future years by fiscal year.
Total award amount was \$1,000,000. \$225,764 is expected to be expended and reimbursed in the current fiscal year.

9. Are matching funds or in-kind services required? If so, provide details and indicate whether or not matching funds are budgeted.
Match was required and was met prior to the No Cost Extension. There is no match required for the No Cost Extension period/budget.

10. Does the grant require additional personnel? If so, provide details of the position type, full or part-time and salary amounts; or use of volunteers.
No

11. Forward a copy of the approved grant documentation and letter of grant award to OMB. (Indicate date forwarded or faxed to OMB).
Granicus #19-1832A

12. If this request is submitted by anyone other than the Department Director, please confirm this amendment has (Type name of Director and date approved)
Karen Yatchum, 2/9/2024

UNANTICIPATED RECEIPT OF FUNDS (I.E. GRANTS) BGT AMENDMENT REQUEST

Please type in the green boxes.

Name of the Person submitting the request: Clark Scott / Keri Vizandiou
 Telephone Extension: 48202

REVENUE: Unanticipated Revenue or Grant Proceeds (Accounts & Amount to be increased)

	FUND XXXX	CENTER XXXXXX	ACCOUNT XXXXXXXX	PROGRAM XXXX	PROJECT XXXXXXXX	CURRENT BUDGET	REQUESTED INCREASE <small>(Rounded Up to \$10)</small>
Account 1	0001	100200	3312001	1712	004750A	0	163,700
Account 2							
Account 3							
Account 4							
Account 5							
Account 6							
Account 7							
Account 8							
Account 9							
Account 10							
Total						0	163,700

EXPENDITURE: Appropriation (Accounts & Amount to be increased)

	FUND XXXX	CENTER XXXXXX	ACCOUNT XXXXXXXX	PROGRAM XXXX	PROJECT XXXXXXXX	CURRENT BUDGET	REQUESTED INCREASE <small>(Rounded Up to \$10)</small>
Account 1	0001	311112	5340001	1712	004750A	0	163,700
Account 2							
Account 3							
Account 4							
Account 5							
Account 6							
Account 7							
Account 8							
Account 9							
Account 10							
Total						0	163,700

Budget Amendment Questions:

Please provide a concise answer to each of the following questions. If any questions are not applicable, enter N/A.

1. What is this the title and purpose of the unanticipated funds or grant proceeds? Provide a summary explanation of the unanticipated funds or grant and the scope of work for which funding will be provided.

U.S. Department of Justice, Office of Violence Against Women, FY2020 Justice for Families Program grant was originally slated to end on September 30, 2023. Pinellas County was approved for a no cost extension through September 30, 2024 as all grant funds had not been expended by September 30, 2023. The grant period began October 1, 2020. Challenges due to COVID impacts on court hearings, capacity challenges for GAL appointments, and some staff turnover limited the ability for the project to fully realize the benefits of leveraging the training, technical assistance, and increase service opportunities provided by the award.

2. Have funds from this source been received before? If yes, indicate when they were last received.

Yes, Pinellas County has received multiple grants from the Department of Justice over the years. A few of the current grants from DoJ include the FY21 Family Treatment Court Enhancement and the Adult Treatment Court-Aurora Expansion Project.

3. Is this amendment related to a previous Board action? If so, please indicate the type of action approved and the date approved.

Yes, original grant award was approved and executed on Granicus #20-1049D

4. Is the program/activity for which the unanticipated funds or grant award already appropriated within the Adopted Budget?

No.

PLEASE NOTE: IF AMENDMENT IS GRANT RELATED COMPLETE ALL THE FOLLOWING QUESTIONS. IF AMENDMENT IS NOT GRANT RELATED, PROCEED TO ITEM #12.

5. Who awarded the grant? Indicate if this is a federal, state or local agency. Include CFDA or CSFA number, if appropriate.

U.S. Department of Justice, Office of Violence Against Women. CFDA 16.021

6. Is the grant a reimbursement grant?

Yes

7. What is the total time period of the grant? Include start and end dates.

Originally three year from 10/1/20-9/30/23. No cost extension to a fourth year ending 9/30/24.

8. What is the total amount of the grant? Will all funds be received in the current fiscal year? If the grant period extends beyond the current fiscal year, indicate the amount anticipated to be received within the current fiscal year and in future years by fiscal year.

Total award amount was \$549,992. \$163,700 is expected to be expended and reimbursed in the current fiscal year.

9. Are matching funds or in-kind services required? If so, provide details and indicate whether or not matching funds are budgeted.

No match or in-kind required.

10. Does the grant require additional personnel? If so, provide details of the position type, full or part-time and salary amounts; or use of volunteers.

No

11. Forward a copy of the approved grant documentation and letter of grant award to OMB. (Indicate date forwarded or faxed to OMB).

See 20-1049D

12. If this request is submitted by anyone other than the Department Director, please confirm this amendment has (Type name of Director and date approved)

Karen Yatchum, 2/9/2024

UNANTICIPATED RECEIPT OF FUNDS (I.E. GRANTS) BGT AMENDMENT REQUEST

Please type in the green boxes.

Name of the Person submitting the request: Krishna Gandhi on behalf of Jodie Sechler
 Telephone Extension: 22526

REVENUE: Unanticipated Revenue or Grant Proceeds (Accounts & Amount to be increased)

	FUND XXXX	CENTER XXXXXX	ACCOUNT XXXXXXXX	PROGRAM XXXX	PROJECT XXXXXXXX	CURRENT BUDGET	REQUESTED INCREASE (Rounded Up to \$10)
Account 1	0001	100200	3312001	1823	006395A	0	1,750,000
Account 2	1025	100200	3342001	1823	006398A	0	41,600
Account 3	1025	100200	3342001	1823	006397A	0	93,280
Account 4							
Account 5							
Account 6							
Account 7							
Account 8							
Account 9							
Account 10							

Total 0 1,884,880

EXPENDITURE: Appropriation (Accounts & Amount to be increased)

	FUND XXXX	CENTER XXXXXX	ACCOUNT XXXXXXXX	PROGRAM XXXX	PROJECT XXXXXXXX	CURRENT BUDGET	REQUESTED INCREASE (Rounded Up to \$10)
Account 1	0001	342110	5340001	1823	006395A	0	593,060
Account 2	0001	342110	5520009	1823	006395A	0	201,860
Account 3	0001	342110	5520098	1823	006395A	0	63,310
Account 4	0001	342110	5640001	1823	006395A	0	891,770
Account 5	1025	343110	5460001	1823	006398A	0	41,600
Account 6	1025	343110	5340001	1823	006397A	0	93,280
Account 7							
Account 8							
Account 9							
Account 10							

Total 0 1,884,880

Budget Amendment Questions:

Please provide a concise answer to each of the following questions. If any questions are not applicable, enter N/A.

1. What is this the title and purpose of the unanticipated funds or grant proceeds? Provide a summary explanation of the unanticipated funds or grant and the scope of work for which funding will be provided.

Unanticipated grant funding: \$1.75M COPS Grant - 006395A, \$41,600 GIS Repository Grant from the E911 Board - 006398A, and \$93,280 Wiring and Cabling Grant from the E911 Board - 006397A

2. Have funds from this source been received before? If yes, indicate when they were last received.

No

3. Is this amendment related to a previous Board action? If so, please indicate the type of action approved and the date approved.

Yes. COPS Grant Legistar 22-1800A. E911 Wiring and Cabling Grant Legistar 23-0890D. E911 GIS Repository Grant Legistar 23-0876D/24-0217D

4. Is the program/activity for which the unanticipated funds or grant award already appropriated within the Adopted Budget?

No

PLEASE NOTE: IF AMENDMENT IS GRANT RELATED COMPLETE ALL THE FOLLOWING QUESTIONS. IF AMENDMENT IS NOT GRANT RELATED, PROCEED TO ITEM #12.

5. Who awarded the grant? Indicate if this is a federal, state or local agency. Include CFDA or CSFA number, if appropriate.

COPS - Federal CFDA 16.71
 E911 - State CFSA Wiring and Cabling 72.002
 E911 - State CFSA GIS Repository 72.003

6. Is the grant a reimbursement grant?

Yes

7. What is the total time period of the grant? Include start and end dates.

006395A 12.31.2025
 006398A 04.30.2029
 006397A 04.30.2025

8. What is the total amount of the grant? Will all funds be received in the current fiscal year? If the grant period extends beyond the current fiscal year, indicate the amount anticipated to be received within the current fiscal year and in future years by fiscal year.

006395A 12.31.2025 - Anticipate encumbering all funds this year, may result in carryforward
 006398A No Five year grant - FY24 \$41,600; FY25 \$38,955; FY26 \$40,902; FY27 \$42,947; FY28 \$45,094
 006397A Yes

9. Are matching funds or in-kind services required? If so, provide details and indicate whether or not matching funds are budgeted.

No

10. Does the grant require additional personnel? If so, provide details of the position type, full or part-time and salary amounts; or use of volunteers.

No

11. Forward a copy of the approved grant documentation and letter of grant award to OMB. (Indicate date forwarded or faxed to OMB).

See attachments to email.

12. If this request is submitted by anyone other than the Department Director, please confirm this amendment has (Type name of Director and date approved)

Krishna Gandhi on behalf of Jodie Sechler

UNANTICIPATED RECEIPT OF FUNDS (I.E. GRANTS) BGT AMENDMENT REQUEST

Please type in the green boxes.

Name of the Person submitting the request: Reta Newman
 Telephone Extension: 26810

REVENUE: Unanticipated Revenue or Grant Proceeds (Accounts & Amount to be increased)

	FUND XXXX	CENTER XXXXXX	ACCOUNT XXXXXXXX	PROGRAM XXXX	PROJECT XXXXXXXX	CURRENT BUDGET	REQUESTED INCREASE <small>(Rounded Up to \$10)</small>
Account 1	0001	100200	3312001	6082	005741A	41,362	18,000
Account 2	0001	100200	3312001	6082	005712A	243,829	42,920
Account 3	0001	100200	3312001	6082	006341A	0	270,050
Account 4							
Account 5							
Account 6							
Account 7							
Account 8							
Account 9							
Account 10							
Total						285,191	330,970

EXPENDITURE: Appropriation (Accounts & Amount to be increased)

	FUND XXXX	CENTER XXXXXX	ACCOUNT XXXXXXXX	PROGRAM XXXX	PROJECT XXXXXXXX	CURRENT BUDGET	REQUESTED INCREASE <small>(Rounded Up to \$10)</small>
Account 1	0001	631120	5640001	6082	005712A	0	42,920
Account 2	0001	631120	5640001	6082	006341A	0	148,400
Account 3	0001	631120	5640001	6082	006341A	0	10,000
Account 4	0001	631120	5680100	6082	006341A	0	59,050
Account 5	0001	631120	5520004	6082	005741A	0	18,000
Account 6	0001	631120	5460001	6082	006341A	0	52,600
Account 7							
Account 8							
Account 9							
Account 10							
Total						0	330,970

Budget Amendment Questions:

Please provide a concise answer to each of the following questions. If any questions are not applicable, enter N/A.

1. What is this the title and purpose of the unanticipated funds or grant proceeds? Provide a summary explanation of the unanticipated funds or grant and the scope of work for which funding will be provided.

This amendment is precipitated by a grant award received after the FY24 budgeting process the 2023 Competitive DNA Capacity Enhancement and Backlog Reduction (CEBR) Program. This amendment also includes two items from the FY22 Formula DNA Capacity Enhancement and Backlog Reduction (CEBR) award that were inadvertently omitted from the FY 23 budget request. The scope of work for these awards are to increase laboratory capacity to process DNA profile from criminal investigations for search in CODIS.

2. Have funds from this source been received before? If yes, indicate when they were last received.

Yes the Formula Coverdell and CEBR awards are received annually; however, the competitive CEBR award, which represents the bulk of this amendment is a new grant that has not been offered in the past.

3. Is this amendment related to a previous Board action? If so, please indicate the type of action approved and the date approved.

No.

4. Is the program/activity for which the unanticipated funds or grant award already appropriated within the Adopted Budget?

No

PLEASE NOTE: IF AMENDMENT IS GRANT RELATED COMPLETE ALL THE FOLLOWING QUESTIONS. IF AMENDMENT IS NOT GRANT RELATED, PROCEED TO ITEM #12.

5. Who awarded the grant? Indicate if this is a federal, state or local agency. Include CFDA or CSFA number, if appropriate.

These are federal grants award by the OJP (Office of Justice Programs).

6. Is the grant a reimbursement grant?

Yes. 100% reimbursement. No matching funds.

7. What is the total time period of the grant? Include start and end dates.

2022 CEBR: OCT 2022-Sept 2024
 2022 CEBR - OCT 2022-Sept 2024
 2023 CEBR-Competitive: Oct 2023 - Sept 2025

8. What is the total amount of the grant? Will all funds be received in the current fiscal year? If the grant period extends beyond the current fiscal year, indicate the amount anticipated to be received within the current fiscal year and in future years by fiscal year.

2022 CEBR: \$286,745 - all remaining funds (reimbursement) will be received in this fiscal year
 2022 CEBR: \$59,362 - all remaining funds (reimbursement) will be received in this fiscal year
 2023 CEBR-Competitive: \$329,091 - all funds expended this year will be received in this fiscal year; part 2 of the project will occur in FY25 and those funds will be budgeted in FY25 budget and reimbursement received in FY25.

9. Are matching funds or in-kind services required? If so, provide details and indicate whether or not matching funds are budgeted.

No.

10. Does the grant require additional personnel? If so, provide details of the position type, full or part-time and salary amounts; or use of volunteers.

No

11. Forward a copy of the approved grant documentation and letter of grant award to OMB. (Indicate date forwarded or faxed to OMB).

2/9/2024

12. If this request is submitted by anyone other than the Department Director, please confirm this amendment has (Type name of Director and date approved)

Jon R Thogmartin - 02-09-24

UNANTICIPATED RECEIPT OF FUNDS (I.E. GRANTS) BGT AMENDMENT REQUEST

Please type in the green boxes.

Name of the Person submitting the request:
 Telephone Extension:

REVENUE: Unanticipated Revenue or Grant Proceeds (Accounts & Amount to be increased)

	FUND XXXX	CENTER XXXXXX	ACCOUNT XXXXXXXX	PROGRAM XXXX	PROJECT XXXXXXXX	CURRENT BUDGET	REQUESTED INCREASE <small>(Rounded Up to \$10)</small>
Account 1	5002	100200	3412601	1541	0000000	3,160,180	250,000
Account 2	5002	100200	3412604	1541	0000000	3,744,890	250,000
Account 3							
Account 4							
Account 5							
Account 6							
Account 7							
Account 8							
Account 9							
Account 10							
Total						6,905,070	500,000

EXPENDITURE: Appropriation (Accounts & Amount to be increased)

	FUND XXXX	CENTER XXXXXX	ACCOUNT XXXXXXXX	PROGRAM XXXX	PROJECT XXXXXXXX	CURRENT BUDGET	REQUESTED INCREASE <small>(Rounded Up to \$10)</small>
Account 1	5002	361930	5520001	1541	0000000	6,147,200	500,000
Account 2							
Account 3							
Account 4							
Account 5							
Account 6							
Account 7							
Account 8							
Account 9							
Account 10							
Total						6,147,200	500,000

Budget Amendment Questions:

Please provide a concise answer to each of the following questions. If any questions are not applicable, enter N/A.

1. What is this the title and purpose of the unanticipated funds or grant proceeds? Provide a summary explanation of the unanticipated funds or grant and the scope of work for which funding will be provided.

2. Have funds from this source been received before? If yes, indicate when they were last received.

3. Is this amendment related to a previous Board action? If so, please indicate the type of action approved and the date approved.

4. Is the program/activity for which the unanticipated funds or grant award already appropriated within the Adopted Budget?

PLEASE NOTE: IF AMENDMENT IS GRANT RELATED COMPLETE ALL THE FOLLOWING QUESTIONS. IF AMENDMENT IS NOT GRANT RELATED, PROCEED TO ITEM #12.

5. Who awarded the grant? Indicate if this is a federal, state or local agency. Include CFDA or CSFA number, if appropriate.

6. Is the grant a reimbursement grant?

7. What is the total time period of the grant? Include start and end dates.

8. What is the total amount of the grant? Will all funds be received in the current fiscal year? If the grant period extends beyond the current fiscal year, indicate the amount anticipated to be received within the current fiscal year and in future years by fiscal year.

9. Are matching funds or in-kind services required? If so, provide details and indicate whether or not matching funds are budgeted.

10. Does the grant require additional personnel? If so, provide details of the position type, full or part-time and salary amounts; or use of volunteers.

11. Forward a copy of the approved grant documentation and letter of grant award to OMB. (Indicate date forwarded or faxed to OMB).

12. If this request is submitted by anyone other than the Department Director, please confirm this amendment has (Type name of Director and date approved)