

Sheriff's Committee Agenda 11/29/12

1. Committee meeting called to order by Chairman
2. Motion to approve minutes of prior committee meeting.

Action Agenda

1. Request to amend County Budget to increase revenue to reflect monies received for insurance recoveries in the amount of \$3,081.00
2. Request reso to transfer funds. Refer attachment #1.

Topics for Discussion

1. We have filled 1 correction officer position due to resignation.

Old Business / Pending Items

RESOLUTION REQUEST FORM NO. 7

Request to Amend County Budget*

**If this is the result of a grant award, also complete and submit Form No. 5 or 6*

DEPARTMENT NAME: Sheriff

DATE: *November 8,*
~~October 24,~~ 2012

- (a) **Purpose of Amendment:** Amend the County Budget to increase revenue to reflect monies received from Insurance recoveries.
- (b) **Appropriation Code, Object Code, Full Title and Amount:**
A.3110 422 L.E. Repair/Maint-Equipment \$3,081.00
- (c) **Revenue Code (with title), and Amount:**
A.3110 2680 L.E. Insurance Recoveries \$3,081.00

*Please note all amount must be in whole dollars – no cents.

RESOLUTION REQUEST FORM NO. 10

Request for Transfer of Funds

TO: JOAN SADY, CLERK, WARREN COUNTY BOARD OF SUPERVISORS

FROM: Nathan H. York Sheriff
Name of Department

SIGNED: 

DATE: November 27, 2012

<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
A.3110 110	L.E Salaries	A.3110 120	L.E. Overtime	\$65,000.00
A.3150 110	Correction Salaries	A.3150 120	Corrections Overtime	\$70,000.00
A.3150 130	Salaries-Part Time	A.3150 120	Corrections OT	\$ 5,000.00
A.3150 140	Sick Leave	A.3150 120	Corrections OT	\$ 5,000.00
A.3150 250	Technical Equip	A.3150 120	Corrections OT	\$ 8,000.00
A.3020 110	911 Salaries	A.3020 120	911 Overtime	\$ 8,000.00
A.3110 418	L.E. Insurance	A.3150 435	Corrections Medical	\$ 4,000.00
A.3110 421	L.E. Equip Rental	A.3150 435	Corrections Medical	\$ 6,000.00
A.3110 422	L.E. Repair/Maint	A.3150 435	Corrections Medical	\$ 4,000.00
A.3110 130	L.E. Part Time	A.3150 435	Corrections Medical	\$ 20,000.00

Please state reason for transfers requested: Adjusting codes in the black.

*Please note: All amounts must be in whole dollars – no cents. !! FORMTEXT ¶ ⊥

CONTINGENT FUND TRANSFER REQUESTS

<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
A.1990 469	Contingent Account- Other Payments/Contributions			

Please state reason for transfer request: Keep code in black at end of year

Please file original request with Clerk of the Board and retain copy for your records.