

**JEFFERSON COUNTY
BUDGET ADJUSTMENT OR AMENDMENT REQUEST**

<u>Adjustment</u>	<u>Description</u>	<u>Approval Level</u>
<input type="checkbox"/> Level 1	Adjustments of operating appropriations up to \$4,999 from one account to another <u>within</u> the department's budget	Department Head
<input type="checkbox"/> Level 2	<input type="checkbox"/> a. Adjustments of operating appropriations over \$5,000 and up from one account to another <u>within</u> the department's budget.	Administrator
	<input type="checkbox"/> b. Substitution of capital items or adjustment of operating to capital appropriations up to \$24,999 from one account to another <u>within</u> the department's budget.	Administrator
<input type="checkbox"/> Level 3	Amendments of operating or capital appropriations needing additional funding from contingency funds from that are under 10% of the funds originally appropriated for an individual department.	Finance Committee
<input checked="" type="checkbox"/> Level 4	<input type="checkbox"/> a. Amendments of operating or capital appropriations needing additional funding from contingency funds from that are over 10% of the funds originally appropriated for an individual department.	County Board
	<input checked="" type="checkbox"/> b. New programs in a department that were not originally budgeted through increase in expenses with offsetting increase in revenue for that program. (i.e. grant funding or donations)	County Board
	<input type="checkbox"/> c. Substitution of capital items or adjustment of operating to capital appropriations over \$25,000 from one account to another <u>within</u> the department's budget.	County Board
	<input type="checkbox"/> d. Amendments of operating or capital appropriations needing funding from general fund balance.	County Board

Increase	Decrease	Old BU	ORG Account #	Account Title	Amount
<input checked="" type="checkbox"/>	<input type="checkbox"/>	4632	4107.421001.	Bioterr. Prepared. = State Aid	\$ (2,100.00)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	4632	4107.532325.	Additional Registration Fees	\$ 150.00
<input checked="" type="checkbox"/>	<input type="checkbox"/>	4632	4107.532335.	Additional Meals (3 breakfasts)	\$ 21.00
<input checked="" type="checkbox"/>	<input type="checkbox"/>	4632	4107.531349.	Misc. Operating Expense	\$ 1,929.00

Description of Adjustment:

Division of Public Health Contract 34641 - Amendment #6: Bioterrorism (Focus A Planning) Preparedness Grant
 Scholarships = \$ 700 x 3 = \$ 2,100 for 3 Health Department staff to attend the WPHA/WALHDAB conference 5/22/18 - 5/24/18
 "Leading the Evolution of Public Health". Gail Scott/Director, Diane Nelson/Public Health Program Manager, Mary Magnuson/PH Nurse
 Note: Grant funding is eligible for use on "Emergency Preparedness" related expenses beyond conference expenses.

Department Head Signature _____ Date _____
 County Administrator Signature _____ Date _____

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Increase	Decrease	BU 4509	ORG Account #	Account Title	Amount
<input checked="" type="checkbox"/>	<input type="checkbox"/>	4509	4120.421001.	Com. Dis. Prev. = State Aid	\$ (5,600.00)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	4509	4120.511110.	Salary Permanent Reg.	\$ 3,767.00
<input type="checkbox"/>	<input checked="" type="checkbox"/>	4501	4101.511110.	Salary Permanent Reg.	\$ (3,767.00)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	4509	4120.512141.	Social Security	\$ 288.00
<input type="checkbox"/>	<input checked="" type="checkbox"/>	4501	4101.512141.	Social Security	\$ (288.00)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	4509	4120.512142.	Retirement Employer	\$ 252.00
<input type="checkbox"/>	<input checked="" type="checkbox"/>	4501	4101.512142.	Retirement Employer	\$ (252.00)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	4509	4120.512144.	Health Insurance	\$ 1,227.00
<input type="checkbox"/>	<input checked="" type="checkbox"/>	4501	4101.512144.	Health Insurance	\$ (1,227.00)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	4509	4120.512173.	Dental Insurance	\$ 66.00
<input type="checkbox"/>	<input checked="" type="checkbox"/>	4501	4101.512173.	Dental Insurance	\$ (66.00)

Description of Adjustment: This grant saves payroll expenses in Public Health ORG 4101.
Per grant guidelines...Funding may be used to offset increasing budgetary pressures resulting from ongoing disease surveillance and investigations at the local level to reduce burden of communicable diseases, ensure or increase capacity to respond to communicable disease events, training to increase competencies around issues, provide more extensive follow-up on communicable disease outbreaks/reports and increase awareness in community.

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Increase	Decrease	Old BU	ORG Account #	Account Title	Amount
<input checked="" type="checkbox"/>	<input type="checkbox"/>	4626.647	4106.421001.	Adult Immuniz Incr.= State Aid	\$ (1,291.32)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	4626.647	4106.511110.	Salary Perm. Reg.	\$ 150.00
	<input checked="" type="checkbox"/>	4501	4101.511110.	Salary Perm. Reg.	\$ (150.00)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	4626.647	4106.512141.	Social Security	\$ 11.00
	<input checked="" type="checkbox"/>	4501	4101.512141.	Social Security	\$ (11.00)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	4626.647	4106.512142.	Retirement Employer	\$ 10.02
	<input checked="" type="checkbox"/>	4501	4101.512142.	Retirement Employer	\$ (10.02)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	4626.647	4106.512144.	Health Insurance	\$ 41.20
	<input checked="" type="checkbox"/>	4501	4101.512144.	Health Insurance	\$ (41.20)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	4626.647	4106.512173.	Dental Insurance	\$ 3.00
	<input checked="" type="checkbox"/>	4501	4101.512173.	Dental Insurance	\$ (3.00)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	4626.647	4106.532335.	Meals (presentations)	\$ 1,000.00
<input checked="" type="checkbox"/>	<input type="checkbox"/>	4626.647	4106.531312.	Folders & Office Supplies	\$ 66.50
<input checked="" type="checkbox"/>	<input type="checkbox"/>	4626.647	4106.535242.	Maintain Equip/Color Copies	\$ 9.60
	<input checked="" type="checkbox"/>	4501	4101.535242.	Maintain Equip/Color Copies	\$ (9.60)

Description of Adjustment:

Increasing Adult Immunization Rates (Round 2) - Immunization Coalition. Renewed grant to improve skills needed to incorporate the immunization conversation into the patient/health care provider encounter and use reminder/recall interventions to offer adult vaccines. (2/12/18 - 8/15/18 Grant Period).

Note: Salary/Fringe Benefits and Color Copies Expense will reduce Public Health ORG 4101 expenses.

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