CC

**BUDGET TRANSFER AUTHORIZATION**

Commissioners' Court Action Approved Denied Other

The Commissioners' Court of Lamb County does hereby order the FY 2021 budget amended as presented and authorized by Local Government Code §111.010(d).

Passed this 8TH Day of October, 2021, on a motion by Logan

and seconded by DeBerry.

James M. DeLoach, County Judge

# LAMB COUNTY

## REQUEST FOR BUDGET AMENDMENT/LINE ITEM TRANSFER

**Department:** District Judge **Contact:** Felix Klein **Date:** 10/08/2021

**It is requested that a Budget Amendment** _____ **Line Item Transfer** X

**be approved for the purpose of:** _____

**Move funds from:** **Move funds to:**

| Fund/Account No. | Account Name | Amount | Fund/Account No. | Account Name | Amount |
|---|---|---|---|---|---|
| 010-5010-5003-20 | PART TIME | 5,931.00 | 010-5010-5002-20 | EMPLOYEES SALARY | 4,731.00 |
| | | | 010-5010-5115-20 | HEALTH INS | 1,200.00 |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | $ 5,931.00 | | | $ 5,931.00 |

# LAMB COUNTY

## REQUEST FOR BUDGET AMENDMENT/LINE ITEM TRANSFER

**Department:** District Clerk **Contact:** Debbie Long **Date:** 09/27/2021

**It is requested that a Budget Amendment** _____ **Line Item Transfer** X

**be approved for the purpose of:** _____

**Move funds from:** **Move funds to:**

| Fund/Account No. | Account Name | Amount | Fund/Account No. | Account Name | Amount |
|---|---|---|---|---|---|
| 010-5020-5501-20 | TRAVEL | 600.00 | 010-5020-5205-20 | NON-CAPITAL | 600.00 |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | $ 600.00 | | | $ 600.00 |

# LAMB COUNTY

## REQUEST FOR BUDGET AMENDMENT/LINE ITEM TRANSFER

**Department:** Co Clerk **Contact:** Tonya Ritchie **Date:** 10/08/2021

**It is requested that a Budget Amendment** _____ **Line Item Transfer** X

**be approved for the purpose of:** _____

**Move funds from:** **Move funds to:**

| Fund/Account No. | Account Name | Amount | Fund/Account No. | Account Name | Amount |
|---|---|---|---|---|---|
| 010-5210-5998-10 | CONTINGENCY | 1,507.00 | 010-5040-5201-10 | OFFICE SUPPLIES | 1,600.00 |
| 010-5040-5200-10 | TRAVEL | 1,549.00 | 010-5040-5205-10 | NON-CAPITAL | 1,456.00 |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | $ 3,056.00 | | | $ 3,056.00 |

# LAMB COUNTY

## REQUEST FOR BUDGET AMENDMENT/LINE ITEM TRANSFER

**Department:** Tax Assessor/Collectc **Contact:** Brenda Goheen **Date:** 10/08/2021

**It is requested that a Budget Amendment** _____ **Line Item Transfer** X

**be approved for the purpose of:** Additional Funding for Part-time

**Move funds from:** **Move funds to:**

| Fund/Account No. | Account Name | Amount | Fund/Account No. | Account Name | Amount |
|---|---|---|---|---|---|
| 010-5050-5201-15 | OFFICE SUPPLIES | 2,764.00 | 010-5050-5003-15 | Part-Time | 2,100.00 |
| | | | 010-5050-5110-15 | RETIREMENT | 242.00 |
| | | | 010-5050-5115-15 | HEALTH INS | 422.00 |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | $ 2,764.00 | | | $ 2,764.00 |

# LAMB COUNTY

## REQUEST FOR BUDGET AMENDMENT/LINE ITEM TRANSFER

**Department:** Treasurer **Contact:** Jerry Yarbrough **Date:** 10/08/2021

**It is requested that a Budget Amendment** _____ **Line Item Transfer** X

**be approved for the purpose of:** _____

**Move funds from:** **Move funds to:**

| Fund/Account No. | Account Name | Amount | Fund/Account No. | Account Name | Amount |
|---|---|---|---|---|---|
| 010-5060-5205-15 | Non-Capital Equip | 200.00 | 010-5060-5705-15 | COPIER LEASE | 200.00 |
| 010-5060-5003-15 | PART-TIME | 4,776.00 | 010-5060-5002-15 | EMPLOYEES SALARY | 4,776.00 |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | $ 4,976.00 | | | $ 4,976.00 |

# LAMB COUNTY

## REQUEST FOR BUDGET AMENDMENT/LINE ITEM TRANSFER

**Department:** County Attorney **Contact:** Scott Say **Date:** 09/27/2021

**It is requested that a Budget Amendment** _____ **Line Item Transfer** X

**be approved for the purpose of:** _____

**Move funds from:** **Move funds to:**

| Fund/Account No. | Account Name | Amount | Fund/Account No. | Account Name | Amount |
|---|---|---|---|---|---|
| 010-5070-5905-25 | INVESTIGATION EXP | 900.00 | 010-5070-5201-25 | OFFICE SUPPLIES | 400.00 |
| | | | 010-5070-5205-25 | NON-CAPITAL | 500.00 |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | $ 900.00 | | | $ 900.00 |

# LAMB COUNTY

## REQUEST FOR BUDGET AMENDMENT/LINE ITEM TRANSFER

**Department:** JP2 **Contact:** Brad Bridges **Date:** 07/18/2021

**It is requested that a Budget Amendment** _____ **Line Item Transfer** X

**be approved for the purpose of:** _____

**Move funds from:** **Move funds to:**

| Fund/Account No. | Account Name | Amount | Fund/Account No. | Account Name | Amount |
|---|---|---|---|---|---|
| 010-5082-5201-20 | OFFICE SUPPLIES | 800.00 | 010-5082-5205-20 | NON-CAPITAL | 800.00 |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | $ 800.00 | | | $ 800.00 |

# LAMB COUNTY

## REQUEST FOR BUDGET AMENDMENT/LINE ITEM TRANSFER

**Department:** JP 3 **Contact:** Tim Walker/Cari McCurry **Date:** 7-30-21

**It is requested that a Budget Amendment** _____ **Line Item Transfer** X

**be approved for the purpose of:** Printer

**Move funds from:** **Move funds to:**

| Fund/Account No. | Account Name | Amount | Fund/Account No. | Account Name | Amount |
|---|---|---|---|---|---|
| 5083-5250-20 | Law Book | 500.00 | 5083-5205-20 | Non Capital | 600.00 |
| 5083-5201-20 | Office Supplies | 100.00 | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | $ 600-00 | | | $ 600-00 |

# LAMB COUNTY

## REQUEST FOR BUDGET AMENDMENT/LINE ITEM TRANSFER

**Department:** VET & WELFARE **Contact:** CYNTHIA BUSSEY **Date:** 09/27/2021

**It is requested that a Budget Amendment** _____ **Line Item Transfer** X

**be approved for the purpose of:** _____

**Move funds from:** **Move funds to:**

| Fund/Account No. | Account Name | Amount | Fund/Account No. | Account Name | Amount |
|---|---|---|---|---|---|
| 010-5120-5501-55 | TRAVEL | 300.00 | 010-5120-5510-55 | DUES & FEES | 300.00 |
| 010-5120-5205-55 | NON-CAPITAL | 300.00 | 010-5120-5201-55 | OFFICE SUPPLIES | 300.00 |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | $ 600.00 | | | $ 600.00 |

# LAMB COUNTY

## REQUEST FOR BUDGET AMENDMENT/LINE ITEM TRANSFER

**Department:** SHERIFF **Contact:** Gary Maddox **Date:** 09/27/2021

**It is requested that a Budget Amendment** _____ **Line Item Transfer** X

**be approved for the purpose of:** _____

**Move funds from:** **Move funds to:**

| Fund/Account No. | Account Name | Amount | Fund/Account No. | Account Name | Amount |
|---|---|---|---|---|---|
| 010-5170-5002-30 | EMPLOYEE SAL | 7,000.00 | 010-5170-5009-30 | OVERTIME | 7,000.00 |
| 010-5170-5501-30 | TRAVEL | 7,300.00 | 010-5170-5401-30 | TELEPHONE | 7,000.00 |
| | | | 010-5170-5510-30 | DUES | 300.00 |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | $ 14,300.00 | | | $ 14,300.00 |

# LAMB COUNTY

## REQUEST FOR BUDGET AMENDMENT/LINE ITEM TRANSFER

**Department:** SHERIFF **Contact:** Gary Maddox **Date:** 09/27/2021

**It is requested that a Budget Amendment** _____ **Line Item Transfer** X

**be approved for the purpose of:** _____

**Move funds from:** **Move funds to:**

| Fund/Account No. | Account Name | Amount | Fund/Account No. | Account Name | Amount |
|---|---|---|---|---|---|
| 010-5171-5002-30 | EMPLOYEE SALARY | 23,000.00 | 010-5171-5009-30 | OVERTIME | 7,000.00 |
| 010-5171-5335-30 | JAIL EQUIP | 1,000.00 | 010-5171-5281-30 | KITCHEN SUPPLIES | 1,000.00 |
| | | | 010-5171-5680-30 | OUT OF COUNTY INMATE | 16,000.00 |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | $ 24,000.00 | | | $ 24,000.00 |

# LAMB COUNTY

## REQUEST FOR BUDGET AMENDMENT/LINE ITEM TRANSFER

**Department:** Littlefield Library **Contact:** CANDY SETH **Date:** 10/08/2021

**It is requested that a Budget Amendment** _____ **Line Item Transfer** X

**be approved for the purpose of:** _____

**Move funds from:** **Move funds to:**

| Fund/Account No. | Account Name | Amount | Fund/Account No. | Account Name | Amount |
|---|---|---|---|---|---|
| 010-5180-5501-80 | TRAVEL | 1,500.00 | 010-5180-5201-80 | OFFICE SUPPLIES | 1,000.00 |
| | | | 010+5180-5305-80 | BUILDING MAINT | 500.00 |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | $ 1,500.00 | | | $ 1,500.00 |

# LAMB COUNTY

## REQUEST FOR BUDGET AMENDMENT/LINE ITEM TRANSFER

**Department:** Olton Library **Contact:** Jocelyn Mandrell **Date:** 10/08/2021

**It is requested that a Budget Amendment** _____ **Line Item Transfer** X

**be approved for the purpose of:** _____

**Move funds from:** **Move funds to:**

| Fund/Account No. | Account Name | Amount | Fund/Account No. | Account Name | Amount |
|---|---|---|---|---|---|
| 010-5181-5301-80 | EQUIP MAINT | 1,200.00 | 010-5181-5205-80 | NON-CAPITAL | 2,400.00 |
| 010-5181-5501-80 | TRAVEL | 1,100.00 | 010-5181-5201-80 | OFFICE SUPPLIES | 300.00 |
| 010-5181-5310-80 | COMPUTER MAINT | 700.00 | 010-5181-5218-80 | PROGRAM DEVELOPMENT | 300.00 |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | $ 3,000.00 | | | $ 3,000.00 |

# LAMB COUNTY

## REQUEST FOR BUDGET AMENDMENT/LINE ITEM TRANSFER

**Department:** Auditor **Contact:** Gina Jones **Date:** 09/27/2021

**It is requested that a Budget Amendment** _____ **Line Item Transfer** X

**be approved for the purpose of:** _____

**Move funds from:** **Move funds to:**

| Fund/Account No. | Account Name | Amount | Fund/Account No. | Account Name | Amount |
|---|---|---|---|---|---|
| 010-5200-6000-15 | CAPITAL OUTLAY | 2,800.00 | 010-5205-15 | NON-CAPITAL | 2,800.00 |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | $ 2,800.00 | | | $ 2,800.00 |

# LAMB COUNTY

## REQUEST FOR BUDGET AMENDMENT/LINE ITEM TRANSFER

**Department:** Non-Departmental **Contact:** Mike DeLoach **Date:** 09/27/2021

**It is requested that a Budget Amendment** _____ **Line Item Transfer** X

**be approved for the purpose of:** _____

**Move funds from:** **Move funds to:**

| Fund/Account No. | Account Name | Amount | Fund/Account No. | Account Name | Amount |
|---|---|---|---|---|---|
| 010-5210-5998-10 | CONTINGENCY | 46,000.00 | 010-5210-6000-10 | CAPITAL OUTLAY | 39,000.00 |
| 010-5210-5510-10 | DUES | 10,000.00 | 010-5210-5610-10 | CONTRACT/PROF | 17,000.00 |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | $ 56,000.00 | | | $ 56,000.00 |

# LAMB COUNTY

## REQUEST FOR BUDGET AMENDMENT/LINE ITEM TRANSFER

**Department:** Maintenance **Contact:** James DeLoach **Date:** 09/27/2021

**It is requested that a Budget Amendment** _____ **Line Item Transfer** X

**be approved for the purpose of:** _____

**Move funds from:** **Move funds to:**

| Fund/Account No. | Account Name | Amount | Fund/Account No. | Account Name | Amount |
|---|---|---|---|---|---|
| 010-5220-5205-40 | NON-CAPTIAL | 2,200.00 | 010-5220-5305-40 | BUILDING MAINT | 4,000.00 |
| 010-5210-5998-10 | CONTINGENCY | 6,800.00 | 010-5220-5405-40 | UTILITIES | 5,000.00 |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | $ 9,000.00 | | | $ 9,000.00 |

# LAMB COUNTY

## REQUEST FOR BUDGET AMENDMENT/LINE ITEM TRANSFER

**Department:** Olton Comm Center **Contact:** James DeLoach **Date:** 10/08/2021

**It is requested that a Budget Amendment** _____ **Line Item Transfer** X

**be approved for the purpose of:** _____

**Move funds from:** **Move funds to:**

| Fund/Account No. | Account Name | Amount | Fund/Account No. | Account Name | Amount |
|---|---|---|---|---|---|
| 010-5210-5998-10 | CONTINGENCY | 200.00 | 010-5231-5405-80 | UTILITIES | 1,000.00 |
| 010-5231-5205-80 | NON-CAPITAL | 800.00 | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | $ 1,000.00 | | | $ 1,000.00 |

# LAMB COUNTY

## REQUEST FOR BUDGET AMENDMENT/LINE ITEM TRANSFER

**Department:** R&B 1 **Contact:** Cory DeBerry **Date:** 10/05/2018

**It is requested that a Budget Amendment** _____ **Line Item Transfer** X

**be approved for the purpose of:** _____

**Move funds from:** **Move funds to:**

| Fund/Account No. | Account Name | Amount | Fund/Account No. | Account Name | Amount |
|---|---|---|---|---|---|
| 021-5121-5380-90 | MATERIALS | 2,927.00 | 021-5121-5375-90 | PARTS & REPAIRS | 18,585.00 |
| 021-5121-5321-90 | FUEL | 11,000.00 | | | |
| 021-51215610-90 | CONTRACT | 3,508.00 | | | |
| 021-5121-5201-90 | SUPPLIES | 1,000.00 | | | |
| 021-5121-5205-90 | NON-CAPITAL | 150.00 | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | $ 18,585.00 | | | $ 18,585.00 |

# LAMB COUNTY

## REQUEST FOR BUDGET AMENDMENT/LINE ITEM TRANSFER

**Department:** R&B 2 **Contact:** Kent Lewis **Date:** 10/08/2021

**It is requested that a Budget Amendment** X **Line Item Transfer** _____

**be approved for the purpose of:** _____

**Move funds from:** **Move funds to:**

| Fund/Account No. | Account Name | Amount | Fund/Account No. | Account Name | Amount |
|---|---|---|---|---|---|
| 022-5122-5321-90 | FUEL | 3,920.00 | 022-5122-5501-90 | TRAVEL | 1,300.00 |
| | | | 022-5122-5825-90 | AUTO INSURANCE | 1,120.00 |
| | | | 022-5122-5375-90 | PARTS & REPAIR | 1,000.00 |
| | | | 022-5122-5405-90 | UTILITIES | 500.00 |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | $ 3,920.00 | | | $ 3,920.00 |

# LAMB COUNTY

## REQUEST FOR BUDGET AMENDMENT/LINE ITEM TRANSFER

**Department:** R&B 3 **Contact:** Danny Short **Date:** 10/08/2021

**It is requested that a Budget Amendment** _____ **Line Item Transfer** X

**be approved for the purpose of:** _____

**Move funds from:** **Move funds to:**

| Fund/Account No. | Account Name | Amount | Fund/Account No. | Account Name | Amount |
|---|---|---|---|---|---|
| 023-5123-5321-90 | FUEL | 9,300.00 | 023-5123-5003-90 | PART-TIME | 3,500.00 |
| | | | 023-2123-5110-60 | RETIREMENT | 500.00 |
| | | | 023-5123-5375-90 | PARTS & REPAIRS | 5,000.00 |
| | | | 023-5123-5501-90 | TRAVEL | 300.00 |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | $ 9,300.00 | | | $ 9,300.00 |

# LAMB COUNTY

## REQUEST FOR BUDGET AMENDMENT/LINE ITEM TRANSFER

**Department:** R&B 4 **Contact:** Lee Logan **Date:** 10/08/2021

**It is requested that a Budget Amendment** _____ **Line Item Transfer** X

**be approved for the purpose of:** _____

**Move funds from:** **Move funds to:**

| Fund/Account No. | Account Name | Amount | Fund/Account No. | Account Name | Amount |
|---|---|---|---|---|---|
| 024-5124-5321-90 | FUEL | 700.00 | 024-5124-5610-90 | CONTRACT | 700.00 |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | $ 700.00 | | | $ 700.00 |

# LAMB COUNTY

## REQUEST FOR BUDGET AMENDMENT/LINE ITEM TRANSFER

**Department:** GRANT FUND **Contact:** Gina Jones **Date:** 10/08/2021

**It is requested that a Budget Amendment** X **Line Item Transfer** _____

**be approved for the purpose of:** CTERZ GRANT

**Move funds from:** **Move funds to:**

| Fund/Account No. | Account Name | Amount | Fund/Account No. | Account Name | Amount |
|---|---|---|---|---|---|
| 059-5122-5380-90 | MATERIALS | 1,719.00 | 059-5122-5610-90 | CONTRACT/ PROFF | 1,719.00 |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | $ 1,719.00 | | | $ 1,719.00 |

# LAMB COUNTY

## REQUEST FOR BUDGET AMENDMENT/LINE ITEM TRANSFER

**Department:** Littlefield Library **Contact:** CANDY SETH **Date:** 10/08/2021

**It is requested that a Budget Amendment** _____ **Line Item Transfer** X

**be approved for the purpose of:** _____

**Move funds from:** **Move funds to:**

| Fund/Account No. | Account Name | Amount | Fund/Account No. | Account Name | Amount |
|---|---|---|---|---|---|
| | | | 060-5180-5205-80 | NON-CAPITAL | 1,861.00 |
| | | | 060-5180-5610-80 | CONTRACT | 115.00 |
| | | | 060-4516 | GRANT REVENUE | 1,976.00 |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | $ - | | | $ 3,952.00 |

# LAMB COUNTY

## REQUEST FOR BUDGET AMENDMENT/LINE ITEM TRANSFER

**Department:** Court House Security **Contact:** GINA JONES **Date:** 10/08/2021

**It is requested that a Budget Amendment** _____ **Line Item Transfer** X

**be approved for the purpose of:** _____

**Move funds from:** **Move funds to:**

| Fund/Account No. | Account Name | Amount | Fund/Account No. | Account Name | Amount |
|---|---|---|---|---|---|
| 084-5084-6000-20 | CAPITAL OUTLAY | 500.00 | 084-5084-5301-20 | EQUIP OPERATION | 500.00 |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | $ 500.00 | | | $ 500.00 |

# LAMB COUNTY

## REQUEST FOR BUDGET AMENDMENT/LINE ITEM TRANSFER

**Department:** Comm Court Records Preservation **Contact:** Judge DeLoach/Gina Jo **Date:** 10/08/2021

**It is requested that a Budget Amendment** _____ **Line Item Transfer** X

**be approved for the purpose of:** DOCUMENT SHREDDING

| Move funds from: | | | Move funds to: | | |
|---|---|---|---|---|---|
| **Fund/Account No.** | **Account Name** | **Amount** | **Fund/Account No.** | **Account Name** | **Amount** |
| 085-5085-5201-10 | SUPPLIES | 500.00 | 085-5085-5610-10 | CONTRACT SERV | 500.00 |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | $ 500.00 | | | $ 500.00 |

# LAMB COUNTY

## REQUEST FOR BUDGET AMENDMENT/LINE ITEM TRANSFER

**Department:** Pre-Trial Diversion Fund **Contact:** SCOTT SAY **Date:** 10/08/2021

**It is requested that a Budget Amendment** _____ **Line Item Transfer** X

**be approved for the purpose of:** _____

**Move funds from:** **Move funds to:**

| Fund/Account No. | Account Name | Amount | Fund/Account No. | Account Name | Amount |
|---|---|---|---|---|---|
| 010-5070-6000-25 | CAPITAL OUTLAY | 500.00 | 173-5070-5201-25 | OFFICE SUPPLIES | 500.00 |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | $ 500.00 | | | $ 500.00 |

# LAMB COUNTY

## REQUEST FOR BUDGET AMENDMENT/LINE ITEM TRANSFER

**Department:** County Attorney **Contact:** Scott Say **Date:** 10/08/2021

**It is requested that a Budget Amendment** X **Line Item Transfer** _____

**be approved for the purpose of:** _____

**Move funds from:** **Move funds to:**

| Fund/Account No. | Account Name | Amount | Fund/Account No. | Account Name | Amount |
|---|---|---|---|---|---|
| 175-5070-6000-25 | CAPITAL OUTLAY | 10,000.00 | 175-5070-5205-25 | Non-Capital | 13,800.00 |
| 175-5070-5905-25 | INVEST EXP | 4,000.00 | 175-5070-5201-25 | OFFICE SUPPLIES | 200.00 |
| 175-5070-5501-25 | TRAVEL | 400.00 | 175-5070-5002-25 | EMPLOYEE SALARY | 400.00 |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | $ 14,400.00 | | | $ 14,400.00 |

# LAMB COUNTY

## REQUEST FOR BUDGET AMENDMENT/LINE ITEM TRANSFER

**Department:** Littlefield Library **Contact:** CANDY SETH **Date:** 10/08/2021

**It is requested that a Budget Amendment** _____ **Line Item Transfer** X

**be approved for the purpose of:** _____

**Move funds from:** **Move funds to:**

| Fund/Account No. | Account Name | Amount | Fund/Account No. | Account Name | Amount |
|---|---|---|---|---|---|
| 190-5180-5201-80 | OFFICE SUPPLIES | 400.00 | 190-5180-5218-80 | PROGRAM DEV | 400.00 |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | $ 400.00 | | | $ 400.00 |