COUNTY OF COMAL
REQUEST FOR BUDGET AMENDMENT

BUDGET YEAR: **2016** **Dept:** **Criminal District Attorney** **DATE OF REQUEST:** **06/02/16**

FROM:

ACCOUNT NUMBER	DESCRIPTION:	AMOUNT:
	General Reserves	$ (5,000.00)
		$ (5,000.00)

TO:

ACCOUNT NUMBER	DESCRIPTION:	AMOUNT:
010-025-5860	TCFV Expenditures	$ 5,000.00
		$ 5,000.00

Justification for request:

To adopt special budget and increase line item in accordance with Texas Local Government Code §111.0106 for $5,000.00 travel reimbursement grant for training events from the Texas Council on Family Violence (TCFV).

Signed:

Department Head

Signed:

David Renken, County Auditor
(Certification of availability of funds in appropriate line items)

NOTE:

IF THE REQUEST IS FOR ACTION OTHER THAN A LINE ITEM TRANSFER WITHIN THE REQUESTING DEPARTMENT'S BUDGET, THE DEPARTMENT HEAD SHALL SIGN THE CERTIFICATION BELOW:

I HAVE THOROUGHLY REVIEWED THE BALANCES IN THE VARIOUS LINE ITEMS IN THE DEPARTMENT BUDGET, COMPARED THESE WITH THE PROJECTED NEEDS FOR THE REMAINDER OF THE BUDGET YEAR, AND DO HEREBY CERTIFY THAT NO FUNDS ARE AVAILABLE WITHIN THE DEPARTMENT BUDGET TO MEET THE NEEDS AS DESCRIBED ABOVE.

Signed:

Department Head

DRAFT