

**COUNTY OF COMAL
REQUEST FOR BUDGET AMENDMENT**

BUDGET YEAR: 2016

Dept: Tax Assessor

DATE OF REQUEST 08/26/16

FROM:

ACCOUNT NUMBER	DESCRIPTION:	AMOUNT:

TO:

ACCOUNT NUMBER	DESCRIPTION:	AMOUNT:
010-012-4310	Tax Assessor / Collector Fees - VIT	1,770.00
010-012-5614	Non Capital Equipment	1,770.00

Justification for request:

A total of \$5,000 was approved for Tax Office's 2016 budget for non-capital office chairs/equipment. The chair proposal has come in at \$6,770, so \$ 1,770 is needed to allow the purchase. Purchases from the VIT funds normally come directly out of VIT, but since this purchase is for non-capital assets, it will need to be recorded in the County's records. It is necessary to make the transfer to the County's General Fund and purchase the item from same. This transfer comes from existing funds.

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