

**ELKHART COUNTY  
ADDITIONAL APPROPRIATION REQUEST**

DATE 2/19/2020

DEPARTMENT Surveyor / Cumulative Drainage 1141 (980)  
NAME NUMBER

	AMOUNT REQUESTED	PROJ. NO.	ACCOUNT NAME	ACCT. NO.	FUND NAME	FUND NO		
1	\$ 690.00	201001	Kosciusko Co. Assessm	44600	Cum Drain	1141		
2	\$ 585.00	201002	Lagrange Co. Prough #38 assessment	44600	Cum Drain	1141		
3	\$ 7,000.00	201003	Juday Ditch	44600	Cum Drain	1141		
4	\$ 20,000.00	201004	Zollinger	44600	Cum Drain	1141		
5								
6								
7								
8								
<b>TOTAL</b>	<b>\$ 28,275.00</b>							
			If Prior Add'l Appropriation Was Approved This Year	Can Transfers Be Effected		APPROVED BY COUNCIL		
	ORIGINAL AMOUNT	as of Date	AMOUNT	DATE	YES	NO	Amount	Date
	Approp. Unspent Request							

**REASON FOR REQUEST** Maintenance on County Regulated Drains

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**ELKHART COUNTY  
ADDITIONAL APPROPRIATION REQUEST**

3/30/2020

DEPARTMENT

Unsafe Building

1207-980

NAME

NUMBER

AMOUNT REQUESTED	PROJ. NO.	ACCOUNT NAME	ACCT. NO.	FUND NAME	FUND NO		
1 \$ 7,865		Other Professional Service	43090	Unsafe Building	1207		
2							
3							
4							
5							
6							
7							
8							
TOTAL \$ 7,865							
ORIGINAL AMOUNT		If Prior Add'l Appropriation Was Approved This Year	Can Transfers Be Effected		APPROVED BY COUNCIL		
Approp. as of Date							
		AMOUNT	DATE	YES	NO	Amount	Date
1							
2							
3							
4							
5							
6							
7							
8							
TOTAL \$							

**REASON FOR REQUEST** Expenses for contractor to demolish unsafe buildings. Expense is tied to existing work being conducted for a demolition.

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**ELKHART COUNTY  
ADDITIONAL APPROPRIATION REQUEST**

3/31/2020

DEPARTMENT

NWG TIF

4504-980

NAME

NUMBER

AMOUNT REQUESTED	PROJ. NO.	ACCOUNT NAME	ACCT. NO.	FUND NAME	FUND NO		
1 \$ 10,000	202505	Construction & Reconstruct	44600	NWG TIF	4504		
2							
3							
4							
5							
6							
7							
8							
TOTAL \$ 10,000							
<b>ORIGINAL AMOUNT</b>		If Prior Add'l Appropriation Was Approved This Year	Can Transfers Be Effected		APPROVED BY COUNCIL		
Approp.	Unspent as of Request Date						
		AMOUNT	DATE	YES	NO	Amount	Date
1							
2							
3							
4							
5							
6							
7							
8							
TOTAL \$							

**REASON FOR REQUEST** Fiber request to help redunancy and serve multiple locations and entity's in Elkhart City and Elkhart County government. To serve schools and businesses as well. Project in conjunction with overall Elkhart County fiber project.

**ELKHART COUNTY  
ADDITIONAL APPROPRIATION REQUEST**

3/30/2020

DEPARTMENT Middlebury East 4510-980  
NAME NUMBER

AMOUNT REQUESTED	PROJ. NO.	ACCOUNT NAME	ACCT. NO.	FUND NAME	FUND NO.		
1	\$ 235,000	administrative fees	43890	Middlebury East	4510		
2							
3							
4							
5							
6							
7							
8							
TOTAL \$ 235,000							
ORIGINAL AMOUNT		If Prior Add'l Appropriation Was Approved This Year	Can Transfers Be Effected		APPROVED BY COUNCIL		
Approp.	as of Date						
		AMOUNT	DATE	YES	NO	Amount	Date
1							
2							
3							
4							
5							
6							
7							
8							
TOTAL \$							

**REASON FOR REQUEST** Reimbursement to town of middlebury for water line extension on CR 14  
and this is a payment per interlocal agreement. This is a one time payment  
and is being requested by the town of middlebury to be repaid. This would  
fullfill our obligation with the town.

**ELKHART COUNTY  
ADDITIONAL APPROPRIATION REQUEST**

3/31/2020

DEPARTMENT

CR 6&17 NE TIF

4511-980

NAME

NUMBER

AMOUNT REQUESTED	PROJ. NO.	ACCOUNT NAME	ACCT. NO.	FUND NAME	FUND NO	
1 \$ 3,000,000	202503	Construction & Reconstruct.	44600	CR 6&17 NE TIF	4511	
2 \$ 50,000	202504	Construction & Reconstruct.	44600	CR 6&17 NE TIF	4511	
3						
4						
5						
6						
7						
8						
<b>TOTAL \$ 3,050,000</b>						
<b>ORIGINAL AMOUNT</b>		If Prior Add'l Appropriation Was Approved This Year	Can Transfers Be Effected		APPROVED BY COUNCIL	
Approp. Unsp as of Requ Date						
		<b>AMOUNT</b>	<b>DATE</b>	<b>YES</b>	<b>NO</b>	<b>Amount</b>
						<b>Date</b>
1						
2						
3						
4						
5						
6						
7						
8						
<b>TOTAL \$</b>						

**REASON FOR REQUEST**

Connectoin in greater elkhart city to create redundancy and provide access to

government such as elkhart county, elkhart city. Access to schools and

businesses. This connections solves low quality or no fiber connection.

Semi regular funding request to demolish unsafe housing structures that

go through the unsafe hearing authority. Homes are community complaint

driven and demolision serves to remove blight. Costs are recouped via liens.





**ELKHART COUNTY  
ADDITIONAL APPROPRIATION REQUEST**

DATE: 3/03/2020

DEPARTMENT: \_\_\_\_\_

Ebola Funds

8147-980

NAME

NUMBER

	AMOUNT REQUESTED	PROJ. NO.	ACCOUNT NAME	ACCT. NO.	FUND NAME	FUND NO	
1	10,000		Miscellaneous expense	43995		8147	
2							
3							
4							
5							
6							
7							
8							
9							
10							
<b>TOTAL</b>	<b>10,000</b>						
			If Prior Add'l Appropriation Was Approved This Year	Can Transfers Be Effectuated		APPROVED BY COUNCIL	
	ORIGINAL AMOUNT						
	Approp.	as of Date		YES	NO	Amount	Date

REASON FOR REQUEST: To appropriate funds for the purchase of supplies to help fight the spread of  
COVID-19 (Coronavirus).  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**ELKHART COUNTY  
ADDITIONAL APPROPRIATION REQUEST**

DATE: March 30, 2020

DEPARTMENT

Commissioners

9142/980

NAME

NUMBER

	AMOUNT REQUESTED	PROJ. NO.	ACCOUNT NAME	ACCT. NO.	FUND NAME	FUND NO		
1	49,780.00		Other Professional Services	43090	Court Interpreter Grant	9142		
2								
3								
4								
5								
6								
7								
8								
<b>TOTAL</b>	<b>49,780.00</b>							
			If Prior Add'l Appropriation Was Approved This Year	Can Transfers Be Effected		APPROVED BY COUNCIL		
	ORIGINAL AMOUNT							
	Approp.	as of Date	AMOUNT	DATE	YES	NO	Amount	Date

REASON FOR REQUEST Grant funds awarded by the State for Reimbursement for use of Court Interpreters.

\_\_\_\_\_

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To be heard April 18, 2020

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**ELKHART COUNTY**  
**REQUEST FOR TRANSFER OF APPROPRIATED**  
**FUNDS BETWEEN MAJOR CLASSIFICATION**

DATE \_\_\_\_\_ DEPARTMENT \_\_\_\_\_ Extension \_\_\_\_\_ 1000-0145 2  
 NAME \_\_\_\_\_ FUND/DEPT NO. \_\_\_\_\_

**TRANSFER FROM**

(1#)	(2)				(6)	
ORIGINAL BUDGET	AMOUNT TO BE TRANSFERRED	AMOUNT SPENT TO DATE	ACCT. NO.	ACCOUNT NAME	PREVIOUS ACTION *T/A & DATE	REVISED BUDGET (Col #1 Less #2, (+ or -) #6)
1 2500.00	311.80	0	42380	Capital Supplies		2188.2
2						
3						
4						
5						
6						
7						
8						
TOTAL \$	311.80					

**TRANSFER TO**

(1#)	(2)				(6)	
ORIGINAL BUDGET	AMOUNT TO BE TRANSFERRED	AMOUNT SPENT TO DATE	ACCT. NO.	ACCOUNT NAME	PREVIOUS ACTION *T/A & DATE	REVISED BUDGET (Col #1 Plus #2, (+ or -) #6)
1 0.00	311.80	0.00	44515	Office furniture/fixtures		311.8
2						
3						
4						
5						
6						
7						
8						
TOTAL \$	311.80					

**REASON FOR TRANSFER** To cover the cost of purchasing two office chairs and standing computer station  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**ELKHART COUNTY**  
**REQUEST FOR TRANSFER OF APPROPRIATED**  
**FUNDS BETWEEN MAJOR CLASSIFICATION**

DATE

DEPARTMENT

Extension

1000-0145<sup>b</sup>

NAME

FUND/DEPT NO.

**TRANSFER FROM**

(1#)	(#2)				(#6)	
ORIGINAL BUDGET	AMOUNT TO BE TRANSFERRED	AMOUNT SPENT TO DATE	ACCT. NO.	ACCOUNT NAME	PREVIOUS ACTION *T/A & DATE	REVISED BUDGET (Col #1 Less #2, (+ or -) #6)
1 2500.00	860.00	0	42380	Capital Supplies		1640
2						
3						
4						
5						
6						
7						
8						
TOTAL \$		860.00				

**TRANSFER TO**

(1#)	(#2)				(#6)	
ORIGINAL BUDGET	AMOUNT TO BE TRANSFERRED	AMOUNT SPENT TO DATE	ACCT. NO.	ACCOUNT NAME	PREVIOUS ACTION *T/A & DATE	REVISED BUDGET (Col #1 Plus #2, (+ or -) #6)
1 0.00	860.00	0.00	44515	Office furniture/fixtures		860
2						
3						
4						
5						
6						
7						
8						
TOTAL \$		860.00				

**REASON FOR TRANSFER** To cover the cost of purchasing two office chairs and 5 standing computer stations

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**ELKHART COUNTY**  
**REQUEST FOR TRANSFER OF APPROPRIATED**  
**FUNDS BETWEEN MAJOR CLASSIFICATION**

DATE 7-Feb-20 DEPARTMENT Superior Ct. 5 1000/166  
NAME FUND/DEPT NO.

**TRANSFER FROM**

(1#)	(#2)			(#6)		
ORIGINAL BUDGET	AMOUNT TO BE TRANSFERRED	AMOUNT SPENT TO DATE	ACCT. NO.	ACCOUNT NAME	PREVIOUS ACTION *T/A & DATE	REVISED BUDGET (Col #1 Less #2, (+ or -) #6)
1 \$3,500.00	1,422.00	\$23.98	42090	Other Office Supplies		
2						
3						
4						
5						
6						
7						
8						
TOTAL \$	1,422.00					

**TRANSFER TO**

(1#)	(#2)			(#6)		
ORIGINAL BUDGET	AMOUNT TO BE TRANSFERRED	AMOUNT SPENT TO DATE	ACCT. NO.	ACCOUNT NAME	PREVIOUS ACTION *T/A & DATE	REVISED BUDGET (Col #1 Plus #2, (+ or -) #6)
1 \$0.00	1,422.00	0.00	44520	Office Equipment		
2						
3						
4						
5						
6						
7						
8						
TOTAL \$	1,422.00					

REASON FOR TRANSFER Dictation Recorder & Software update for Windows 10

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**ELKHART COUNTY**  
**REQUEST FOR TRANSFER OF APPROPRIATED**  
**FUNDS BETWEEN MAJOR CLASSIFICATION**

DATE: 3/13/2020

DEPARTMENT

Health Admin

1159-340

NAME

FUND/DEPT NO.

**TRANSFER FROM**

(1#)	(2#)				(6#)	
ORIGINAL BUDGET	AMOUNT TO BE TRANSFERRED	AMOUNT SPENT TO DATE	ACCT. NO.	ACCOUNT NAME	PREVIOUS ACTION *T/A & DATE	REVISED BUDGET (Col #1 Less #2, (+ or -) #6)
\$19,000	1,807	642.40	43090	other services		\$ 17,193.00
<b>TOTAL \$</b>	<b>\$1,807.00</b>					

**TRANSFER TO**

(1#)	(2#)				(6#)	
ORIGINAL BUDGET	AMOUNT TO BE TRANSFERRED	AMOUNT SPENT TO DATE	ACCT. NO.	ACCOUNT NAME	PREVIOUS ACTION *T/A & DATE	REVISED BUDGET (Col #1 Plus #2, (+ or -) #6)
\$6,000	1,807.00	0.00	44535	Data Processing Equipment		\$7,807.00
<b>TOTAL \$</b>	<b>\$1,807.00</b>					

**REASON FOR TRANSFER** To replace 2 computers that are 8 years old.

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**ELKHART COUNTY**  
**REQUEST FOR TRANSFER OF APPROPRIATED**  
**FUNDS BETWEEN MAJOR CLASSIFICATION**

DATE 3/2/2020 DEPARTMENT Health Department - CHN 1159-340 *b*  
NAME FUND/DEPT NO.

**TRANSFER FROM**

(1#)	(2)	(3)	(4)	(5)	(6)	(7)
ORIGINAL BUDGET	AMOUNT TO BE TRANSFERRED	AMOUNT SPENT TO DATE	ACCT. NO.	ACCOUNT NAME	PREVIOUS ACTION *T/A & DATE	REVISED BUDGET (Col #1 Less #2, (+ or -) #6)
36,150	2,102.00	636.66	42180	Medical Supplies		34,048.00
TOTAL \$		2,102.00				

**TRANSFER TO**

(1#)	(2)	(3)	(4)	(5)	(6)	(7)
ORIGINAL BUDGET	AMOUNT TO BE TRANSFERRED	AMOUNT SPENT TO DATE	ACCT. NO.	ACCOUNT NAME	PREVIOUS ACTION *T/A & DATE	REVISED BUDGET (Col #1 Plus #2, (+ or -) #6)
0	2,102.00		44545	Other Office Equipment		\$2,102.00
TOTAL \$		2,102.00				

**REASON FOR TRANSFER** Purchase of new exam table to replace broken one.

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**ELKHART COUNTY**  
**REQUEST FOR TRANSFER OF APPROPRIATED**  
**FUNDS BETWEEN MAJOR CLASSIFICATION**

DATE 3/19/2020 DEPARTMENT Breastfeeding Peer Counselor 8102-980  
NAME FUND/DEPT NO.

**TRANSFER FROM**

(1#)	(2)				(6)	
ORIGINAL BUDGET	AMOUNT TO BE TRANSFERRED	AMOUNT SPENT TO DATE	ACCT. NO.	ACCOUNT NAME	PREVIOUS ACTION *T/A & DATE	REVISED BUDGET (Col #1 Less #2, (+ or -) #6)
2,224	808.00	0.00	43110	Sustenance	0	1,416.00
TOTAL \$		808.00				

**TRANSFER TO**

(1#)	(2)				(6)	
ORIGINAL BUDGET	AMOUNT TO BE TRANSFERRED	AMOUNT SPENT TO DATE	ACCT. NO.	ACCOUNT NAME	PREVIOUS ACTION *T/A & DATE	REVISED BUDGET (Col #1 Plus #2, (+ or -) #6)
2,625	808.00	3,224.00	41330	Wellness	0	\$3,433.00
TOTAL \$		808.00				

**REASON FOR TRANSFER** \_\_\_\_\_  
\_\_\_\_\_  
Transfer is to cover underbudgeted wellness expenses.  
We had an employee accept county benefits that I didn't know about.  
\_\_\_\_\_  
\_\_\_\_\_



**ELKHART COUNTY**  
**REQUEST FOR TRANSFER OF APPROPRIATED**  
**FUNDS BETWEEN MAJOR CLASSIFICATION**

DATE 2/4/2020 DEPARTMENT Digital Dental Equipment 9108-980  
NAME FUND/DEPT NO.

**TRANSFER FROM**

(1#)	(2)				(6)	
ORIGINAL BUDGET	AMOUNT TO BE TRANSFERRED	AMOUNT SPENT TO DATE	ACCT. NO.	ACCOUNT NAME	PREVIOUS ACTION *T/A & DATE	REVISED BUDGET (Col #1 Less #2, (+ or -) #6)
4,000	1,174.00	1,972.56	42195	Operating Supplies	0	\$2,826.00
TOTAL \$		1,174.00				

**TRANSFER TO**

(1#)	(2)				(6)	
ORIGINAL BUDGET	AMOUNT TO BE TRANSFERRED	AMOUNT SPENT TO DATE	ACCT. NO.	ACCOUNT NAME	PREVIOUS ACTION *T/A & DATE	REVISED BUDGET (Col #1 Plus #2, (+ or -) #6)
0	1,174.00	0.00	44510	Capital Supplies	0	\$1,174.00
TOTAL		1,174.00				

REASON FOR TRANSFER \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Transfer is to cover asseted purchase for the dental clinic.  
\_\_\_\_\_  
\_\_\_\_\_

**ELKHART COUNTY**  
**REQUEST FOR TRANSFER OF APPROPRIATED**  
**FUNDS BETWEEN \_\_\_\_\_ MAJOR CLASSIFICATION**

DATE 23-Mar-20 DEPARTMENT Court Services-General 9113-980  
NAME \_\_\_\_\_ FUND/DEPT NO. \_\_\_\_\_

**TRANSFER FROM**

(1#)	(2#)					(6#)
ORIGINAL BUDGET	AMOUNT TO BE TRANSFERRED	AMOUNT SPENT TO DATE	ACCT. NO.	ACCOUNT NAME	PREVIOUS ACTION *T/A & DATE	REVISED BUDGET (Col #1 Less #2, (+ or -) #6)
32000.00	\$12,120.00	\$0.00	43090	Other Professional Ser	12/16/19-\$10,000	\$7,000.00
TOTAL \$	\$12,120.00					

**TRANSFER TO**

(1#)	(2#)					(6#)
ORIGINAL BUDGET	AMOUNT TO BE TRANSFERRED	AMOUNT SPENT TO DATE	ACCT. NO.	ACCOUNT NAME	PREVIOUS ACTION *T/A & DATE	REVISED BUDGET (Col #1 Plus #2, (+ or -) #6)
\$8,365.00	\$6,000.00	\$17,001.25	41210	Protective Services	12/18/19-\$8138	\$22,503.00
\$790.00	\$423.00	\$978.14	41300	Social Security/FICA	N/A	\$1,213.00
\$368.00	\$211.00	\$228.75	41305	Medicare	N/A	\$579.00
\$1,600.00	\$5,486.00	\$0.00	42350	Program Supplies	12/16/19-\$900	\$7,986.00
TOTAL \$	\$12,120.00					

**REASON FOR TRANSFER** These transfers are to covers expenses that have been approved through the amendment process in the JDAI grant.

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**ELKHART COUNTY**  
**REQUEST FOR TRANSFER OF APPROPRIATED**  
**FUNDS BETWEEN \_\_\_\_\_ MAJOR CLASSIFICATION**

DATE 23-Mar-20 DEPARTMENT Court Services-General 9113-980 2  
NAME FUND/DEPT NO.

**TRANSFER FROM**

(1#)	(2#)	(3#)	(4#)	(5#)	(6#)	(7#)
ORIGINAL BUDGET	AMOUNT TO BE TRANSFERRED	AMOUNT SPENT TO DATE	ACCT. NO.	ACCOUNT NAME	PREVIOUS ACTION *T/A & DATE	REVISED BUDGET (Col #1 Less #2, (+ or -) #6)
32000.00	\$2,000.00	\$0.00	43090	Other Profess	12/16/19-(\$10,000); 3/23/2	\$7,880.00
<b>TOTAL \$</b>	<b>2,000.00</b>					

**TRANSFER TO**

(1#)	(2#)	(3#)	(4#)	(5#)	(6#)	(7#)
ORIGINAL BUDGET	AMOUNT TO BE TRANSFERRED	AMOUNT SPENT TO DATE	ACCT. NO.	ACCOUNT NAME	PREVIOUS ACTION *T/A & DATE	REVISED BUDGET (Col #1Plus #2, (+ or -) #6)
\$8,365.00	\$2,000.00	\$17,001.25	41210	Protective Se	12/18/19-\$8138; 3/23/20-\$	\$28,503.00
<b>TOTAL \$</b>	<b>2,000.00</b>					

**REASON FOR TRANSFER** These transfers are to covers expenses that have been approved through the amendment process in the JDAI grant.

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**ELKHART COUNTY**  
**REQUEST FOR TRANSFER OF APPROPRIATED**  
**FUNDS BETWEEN \_\_\_\_\_ MAJOR CLASSIFICATION**

DATE 13-Mar-20 DEPARTMENT Court Services-General 9135-980  
NAME FUND/DEPT NO.

**TRANSFER FROM**

(1#)	(#2)				(#6)	
ORIGINAL BUDGET	AMOUNT TO BE TRANSFERRED	AMOUNT SPENT TO DATE	ACCT. NO.	ACCOUNT NAME	PREVIOUS ACTION *T/A & DATE	REVISED BUDGET (Col #1 Less #2, (+ or -) #6)
7670.00	1,910.00	1018	43090	Other Prof.l Services	N/A	5760
<b>TOTAL \$</b>	<b>1,910.00</b>					

**TRANSFER TO**

(1#)	(#2)				(#6)	
ORIGINAL BUDGET	AMOUNT TO BE TRANSFERRED	AMOUNT SPENT TO DATE	ACCT. NO.	ACCOUNT NAME	PREVIOUS ACTION *T/A & DATE	REVISED BUDGET (Col #1Plus #2, (+ or -) #6)
1590.00	1,910.00	893.76	42350	Program Supplies	N/A	3,500.00
<b>TOTAL \$</b>	<b>1,910.00</b>					

**REASON FOR TRANSFER** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_