

**ELKHART COUNTY  
ADDITIONAL APPROPRIATION REQUEST**

10.20.22  
DATE:

GENERAL  
FUND NAME  
Sheriff  
DEPARTMENT NAME

1000-105  
FUND NUMBER  
105  
DEPARTMENT NUMBER

AMOUNT REQUESTED	PROJ. NO.	FUND NAME	FUND NO.	ACCOUNT/PROJECT NAME	ACCOUNT NO.	
\$217,000.00		GENERAL	1000	OTH. PROFESS. SERV.	43090	
\$58,000.00		GENERAL	1000	MOTOR VEHICLES	44500	
275,000.00						
ORIGINAL AMOUNT			If Prior Add'l Appropriation Was Approved This Year		APPROVED BY COUNCIL	
Approp.	Unspent Request	as of Date	Can Transfers Be Effectd		BY COUNCIL	
			YES	NO	Amount	Date
0.00						

**REASON FOR REQUEST (Be Specific)** Appropriating revenue from auction, insurance money from totaled vehicle and surplus bed rental income to cover increased costs of inmate food, extradition fees and the purchase of replacement vehicles for process servers.

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\_\_\_\_\_  
Signature of Department Head

**ELKHART COUNTY  
ADDITIONAL APPROPRIATION REQUEST**

10/24/2022  
DATE:

General Fund  
FUND NAME  
Buildings and Grounds  
DEPARTMENT NAME

1000-140  
FUND NUMBER  
140  
NUMBER

AMOUNT REQUESTED	PROJ. NO.	FUND NAME	FUND NO.	ACCOUNT/PROJECT NAME	ACCOUNT NO.		
\$175,000.00		General Fund	1000	Building Repairs	43500		
175,000.00							
<b>ORIGINAL AMOUNT</b>		<b>If Prior Add'l Appropriation Was Approved This Year</b>	<b>Can Transfers Be Effected</b>		<b>APPROVED BY COUNCIL</b>		
Approp.	Unspent as of Request Date						
		<b>AMOUNT</b>	<b>DATE</b>	<b>YES</b>	<b>NO</b>	<b>Amount</b>	<b>Date</b>
0.00							

**REASON FOR REQUEST** \_\_\_\_\_  
**(Be Specific)** Health Dept. Elevator Modernization

The computer system (Dover DMC) is obsolete and certain replacement parts are no longer available.  
Modernization is the replacement of key operating components without a full-fledged construction project.  
This price includes renovations of the elevator cab including walls light and stainless steel door panels.  
Dover Microprocessor Controller system is over 35 years old and should be upgraded.

Donald F. Tubicsak  
Signature of Department Head

**ELKHART COUNTY  
ADDITIONAL APPROPRIATION REQUEST**

10/25/2022  
**DATE:**

EDIT  
**FUND NAME**  
Highway  
**DEPARTMENT NAME**

1112  
**FUND NUMBER**  
980  
**DEPARTMENT NUMBER**

AMOUNT REQUESTED	PROJ. NO.	FUND NAME	FUND NO.	ACCOUNT/PROJECT NAME	ACCOUNT NO.	
6,000,000	220022	EDIT	44600	CR 38 - CR 35 to SR 13 Reconstruction	1112	
6,000,000.00						
ORIGINAL AMOUNT		If Prior Add'l Appropriation Was Approved This Year	Can Transfers Be Effected		APPROVED BY COUNCIL	
Approp.	Unspent as of Request Date		YES	NO	Amount	Date
0.00						

**REASON FOR REQUEST** \_\_\_\_\_  
**(Be Specific)**

1) Funds for construction and associated costs for the CR 38 - CR 35 to SR 13 reconstruction project.

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Charlie McKenzie, P.E.  
Signature of Department Head

**ELKHART COUNTY  
ADDITIONAL APPROPRIATION REQUEST**

10/14/2022  
**DATE:**

LIT Special Purpose  
**FUND NAME**  
Buildings and Grounds  
**DEPARTMENT NAME**

1114-140  
**FUND NUMBER**  
140  
**DEPARTMENT NUMBER**

AMOUNT REQUESTED	PROJ. NO.	FUND NAME	UND NO	ACCOUNT/PROJECT NAME	ACCOUNT NO.
\$92,000.00		LIT Special Purpose	1114	Building Repairs	43500
92,000.00					

  

ORIGINAL AMOUNT		If Prior Add'l Appropriation Was Approved This Year	Can Transfers Be Effected		APPROVED BY COUNCIL	
Approp.	Unspen as of Reques Date		YES	NO	Amount	Date
0.00						

**REASON FOR REQUEST  
(Be Specific)**

In the Utility Bld.

The booster pump system at the jail is 17 years old and not working as it should. Pipes & fittings within the system are corroding and leaking. The computer is failing causing inconsistent pressure. High water pressure spikes cause damage to vital equipment such as water softener, reverse os pumps and other piping throughout the building.

Donald F. Tubicsak  
Signature of Department Head



**ELKHART COUNTY  
ADDITIONAL APPROPRIATION REQUEST**

10/25/2022  
**DATE:**

Cumulative Bridge  
**FUND NAME**  
Highway  
**DEPARTMENT NAME**

1135  
**FUND NUMBER**  
980  
**NUMBER**

AMOUNT REQUESTED	PROJ. NO.	FUND NAME	FUND NO.	ACCOUNT/PROJECT NAME	ACCOUNT NO.		
80,000	220022	Cumulative Bridge	44600	BR 312 ROW	1135		
80,000.00							
ORIGINAL AMOUNT			If Prior Add'l Appropriation Was Approved This Year	Can Transfers Be Effected		APPROVED BY COUNCIL	
Approp.	Unspent Request	as of Date		YES	NO	Amount	Date
0.00							

**REASON FOR REQUEST** \_\_\_\_\_  
**(Be Specific)**

1) Funds to pay for right of way acquisition and associated costs for the replacement / widening of BR 312, carrying CR 142 over Turkey Creek between CR 21 and SR 13.  
The County will be reimbursed with federal funds up to 80%.

\_\_\_\_\_  
Charlie McKenzie, P.E.  
Signature of Department Head

**ELKHART COUNTY  
ADDITIONAL APPROPRIATION REQUEST**

10/11/2022  
**DATE:**

Cumulative Drainage  
**FUND NAME**  
Administrative  
**DEPARTMENT NAME**

1141  
**FUND NUMBER**  
980  
**DEPARTMENT NUMBER**

AMOUNT REQUESTED	PROJ. NO.	FUND NAME	FUND NO.	ACCOUNT/PROJECT NAME	ACCOUNT NO.	
\$500,000.00	221010	Cum Drain	1141	Turkey Creek	44600	
\$4,000.00	221011	Cum Drain	1141	Rink Lat. Stoney Creek	44600	
504,000.00						
<b>ORIGINAL AMOUNT</b>		<b>If Prior Add'l Appropriation Was Approved This Year</b>	<b>Can Transfers Be Effected</b>		<b>APPROVED BY COUNCIL</b>	
Approp.	Unspen as of Reques Date		YES	NO	Amount	Date
0.00						

**REASON FOR REQUEST (Be Specific)** \_\_\_\_\_  
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\_\_\_\_\_  
 Lynn Loucks, Drainage Board Chairman  
 Signature of Department Head

**ELKHART COUNTY  
ADDITIONAL APPROPRIATION REQUEST**

10/13/2022  
**DATE:**

GIS  
**FUND NAME**  
Planning & Development  
**DEPARTMENT NAME**

1150  
**FUND NUMBER**  
980  
**DEPARTMENT NUMBER**

AMOUNT REQUESTED	PROJ. NO.	FUND NAME	FUND NO.	ACCOUNT/PROJECT NAME	ACCOUNT NO.	
\$5,309.00		GIS	1150	Professional Services	43090	
\$20,000.00		GIS	1150	Professional Services	43090	
25,309.00						
<b>ORIGINAL AMOUNT</b>		<b>If Prior Add'l Appropriation Was Approved This Year</b>	<b>Can Transfers Be Effected</b>		<b>APPROVED BY COUNCIL</b>	
Approp.	Unspent as of Reques Date		YES	NO	Amount	Date
0.00						

**REASON FOR REQUEST (Be Specific)** 2021 Parcel Builder Suite through Sidwell invoice was received late and paid out of the 2022 budget.  
Additional funds needed to cover the 2022 maintenance invoice.  
For contractual services to assist with GIS development and needs.

Chris Godlewski  
Signature of Department Head

**ELKHART COUNTY  
ADDITIONAL APPROPRIATION REQUEST**

10/25/2022  
DATE:

Health Fund  
FUND NAME  
Health  
DEPARTMENT NAME

1159  
FUND NUMBER  
340  
DEPARTMENT NUMBER

AMOUNT REQUESTED	PROJ. NO.	FUND NAME	FUND NO.	ACCOUNT/PROJECT NAME	ACCOUNT NO.		
\$50,000.00		Health	43090	Other professional Servic	43090		
50,000.00							
<b>ORIGINAL AMOUNT</b>		<b>If Prior Add'l Appropriation Was Approved This Year</b>	<b>Can Transfers Be Effected</b>		<b>APPROVED BY COUNCIL</b>		
Approp.	Unspent as of Reques' Date						
		<b>AMOUNT</b>	<b>DATE</b>	<b>YES</b>	<b>NO</b>	<b>Amount</b>	<b>Date</b>
0.00							

**REASON FOR REQUEST (Be Specific)** To help pay with the purchase of a new elevator for Lincoln Center.

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Concetta Sanfilippo  
Signature of Department Head



**ELKHART COUNTY  
ADDITIONAL APPROPRIATION REQUEST**

10/25/2022  
**DATE:**

Northwest Gateway TIF  
**FUND NAME**  
Planning & Development  
**DEPARTMENT NAME**

4504  
**FUND NUMBER**  
980  
**NUMBER**

AMOUNT REQUESTED	PROJ. NO.	FUND NAME	FUND NO.	ACCOUNT/PROJECT NAME	ACCOUNT NO.		
\$35,100.00	222516	Northwest Gateway TIF	4504	cons/recon	44600		
35,100.00							
<b>ORIGINAL AMOUNT</b>		<b>If Prior Add'l Appropriation Was Approved This Year</b>	<b>Can Transfers Be Effectcd</b>		<b>APPROVED BY COUNCIL</b>		
Approp.	Unspent as of Request Date						
		<b>AMOUNT</b>	<b>DATE</b>	<b>YES</b>	<b>NO</b>	<b>Amount</b>	<b>Date</b>
0.00							

**REASON FOR REQUEST (Be Specific)** Demolition of building in NWG TIF - RDC owned building

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Chris Godlewski  
Signature of Department Head

**ELKHART COUNTY  
ADDITIONAL APPROPRIATION REQUEST**

10/25/2022  
DATE:

Middlebury East TIF  
FUND NAME  
Planning & Development  
DEPARTMENT NAME

4510  
FUND NUMBER  
980  
NUMBER

AMOUNT REQUESTED	PROJ. NO.	FUND NAME	FUND NO.	ACCOUNT/PROJECT NAME	ACCOUNT NO.		
\$60,000.00	222517	Middlebury East TIF	4510	const/recn	44600		
60,000.00							
<b>ORIGINAL AMOUNT</b>		<b>If Prior Add'l Appropriation Was Approved This Year</b>	<b>Can Transfers Be Effected</b>		<b>APPROVED BY COUNCIL</b>		
Approp.	Unspent as of Request Date						
		AMOUNT	DATE	YES	NO	Amount	Date
0.00							

**REASON FOR REQUEST (Be Specific)** Design cost for Warren Street (CR 16) reconstruction on the east side of Middlebury  
 \_\_\_\_\_  
 \_\_\_\_\_  
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Chris Godlewski  
Signature of Department Head

**ELKHART COUNTY  
ADDITIONAL APPROPRIATION REQUEST**

10/25/2022  
**DATE:**

SR 13 TIF  
**FUND NAME**  
Planning & Development  
**DEPARTMENT NAME**

4514  
**FUND NUMBER**  
980  
**DEPARTMENT NUMBER**

AMOUNT REQUESTED	PROJ. NO.	FUND NAME	FUND NO.	ACCOUNT/PROJECT NAME	ACCOUNT NO.	
\$735,000.00	222518	SR 13 TIF	4514	const/recn	44600	
735,000.00						
ORIGINAL AMOUNT		If Prior Add'l Appropriation Was Approved This Year	Can Transfers Be Effected		APPROVED BY COUNCIL	
Approp.	Unspent as of Request Date		YES	NO	Amount	Date
0.00						

**REASON FOR REQUEST** design costs for the SR 13 water utility  
**(Be Specific)**

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Chris Godlewski  
Signature of Department Head

**ELKHART COUNTY  
ADDITIONAL APPROPRIATION REQUEST**

10/24/2022  
DATE

Community Corrections  
DEPARTMENT NAME

4913.0981  
DEPARTMENT NUMBER

AMOUNT REQUESTED	PROJ. NO.	ACCOUNT NAME	ACCT. NO.	FUND NAME	FUND NO
\$73,278.00		Supervisor & Oth Admin	41115	CTP	4913.0981
\$3,418.00		FICA	41300	CTP	4913.0981
799		Medicare	41305	CTP	4913.0981
14414		Insurance	41310	CTP	4913.0981
6174		PERF	41400	CTP	4913.0981
98083					
TOTAL					

  

ORIGINAL AMOUNT			If Prior Add'l Appropriation Was Approved This Year	Can Transfers Be Effectcd		APPROVED BY COUNCIL			
Approp.	Unspent Request	as of Date		AMOUNT	DATE	YES	NO	Amount	Date
1									
2									
3									
4									
5									
6									
7									
8									
TOTAL \$									

**REASON FOR REQUEST** To cover Salary expenses due to County approved salaries and amount awarded in  
the DOC Grant

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Helen Calvin  
Signature of Department Head



**ELKHART COUNTY  
ADDITIONAL APPROPRIATION REQUEST**

10/25/2022  
**DATE:**

School Lunch Program Grant  
**FUND NAME**  
Elkhart County Judiciary  
**DEPARTMENT NAME**

4925  
**FUND NUMBER**  
981  
**DEPARTMENT NUMBER**

AMOUNT REQUESTED	PROJ. NO.	FUND NAME	FUND NO.	ACCOUNT/PROJECT NAME	ACCOUNT NO.	
\$520.76		School Lunch Program Grant	4925	Food	42310	
520.76						
ORIGINAL AMOUNT		If Prior Add'l Appropriation Was Approved This Year	Can Transfers Be Effectuated		APPROVED BY COUNCIL	
Approp.	Unsp. as of Req Date		YES	NO	Amount	Date
0.00						

**REASON FOR REQUEST**  
(Be Specific) \_\_\_\_\_

We unexpectedly received additional Supply Chain Assistance (SCA) Funds in the amount of \$520.76 at need to be appropriated.

\_\_\_\_\_  
Ross J. Maxwell  
Signature of Department Head

**ELKHART COUNTY  
ADDITIONAL APPROPRIATION REQUEST**

10/11/2022  
DATE:

CAER COVID Test Site Grant  
FUND NAME  
Health  
DEPARTMENT NAME

8184  
FUND NUMBER  
980  
DEPARTMENT NUMBER

AMOUNT REQUESTED	PROJ. NO.	FUND NAME	FUND NO.	ACCOUNT/PROJECT NAME	ACCOUNT NO.	
\$50,000.00		CAER COVID Test Site	8184	Other Professional Serv	43090	
50,000.00						
ORIGINAL AMOUNT		If Prior Add'l Appropriation Was Approved This Year	Can Transfers Be Effectuated		APPROVED BY COUNCIL	
Approp.	Unspent as of Request Date		YES	NO	Amount	Date
0.00						

**REASON FOR REQUEST (Be Specific)** To pay the Elkhart Fire Department to administer COVID tests until December 31, 2022.

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Concetta Sanfilippo  
Signature of Department Head

**ELKHART COUNTY  
ADDITIONAL APPROPRIATION REQUEST**

10/26/2022  
DATE:

American Rescue Plan  
FUND NAME  
Commissioners  
DEPARTMENT NAME

8951  
FUND NUMBER  
980  
DEPARTMENT NUMBER

AMOUNT REQUESTED	PROJ. NO.	FUND NAME	FUND NO.	ACCOUNT/PROJECT NAME	ACCOUNT NO.	
\$99,536.00	222651	American Rescue Plan	8951	New Courthouse	44600	
\$508,800.00	222652	American Rescue Plan	8951	New Courthouse	44600	
\$61,432.00	222653	American Rescue Plan	8951	New Courthouse	44600	
669,768.00						
ORIGINAL AMOUNT		If Prior Add'l Appropriation Was Approved This Year	Can Transfers Be Effectuated		APPROVED BY COUNCIL	
Approp.	Unspen' as of Reques Date		YES	NO	Amount	Date
0.00						

REASON FOR REQUEST (Be Specific) 1. Funds required for upgraded flooring in the new courthouse to Terrazo  
2. Funds for façade enhancement for the new courthouse  
3. Funds required for lightening protection for the new courthouse.  
 To be heard: Commissioner Nov 7, 2022  
Council Nov 12, 2022

Jeff Taylor  
Signature of Department Head

**ELKHART COUNTY  
ADDITIONAL APPROPRIATION REQUEST**

10/25/2022  
**DATE:**

Court Interpreter Grant  
**FUND NAME**  
Elkhart County Judiciary  
**DEPARTMENT NAME**

9142  
**FUND NUMBER**  
980  
**NUMBER**

AMOUNT REQUESTED	PROJ. NO.	FUND NAME	FUND NO.	ACCOUNT/PROJECT NAME	ACCOUNT NO.	
\$15,625.07		Court Interpreter Grant	9142-980		43090	
15,625.07						
ORIGINAL AMOUNT		If Prior Add'l Appropriation Was Approved This Year	Can Transfers Be Effected		APPROVED BY COUNCIL	
Approp.	Unspent as of Request Date		YES	NO	Amount	Date
		AMOUNT DATE				
0.00						

**REASON FOR REQUEST  
(Be Specific)**

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This appropriation is in part correcting the carry-over amount from the emergency funds, combined with the new grant funds at the beginning of 2022. After taking this grant over in July of 2022, there were previous errors discovered.

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This appropriation will correct those errors. Additionally, on 10/20/2022, we received \$15,000.00 in emergency grant funds that must be appropriated.

\_\_\_\_\_

Ross J. Maxwell  
Signature of Department Head



**ELKHART COUNTY  
ADDITIONAL APPROPRIATION REQUEST**

10/12/2022  
**DATE:**

Safety Pin  
**FUND NAME**  
Health  
**DEPARTMENT NAME**

9148  
**FUND NUMBER**  
980  
**NUMBER**

AMOUNT REQUESTED	PROJ. NO.	FUND NAME	FUND NO.	ACCOUNT/PROJECT NAME	ACCOUNT NO.	
15,750		Professional	41120	Safety PIN Grant	9148	
1,024		Social Security	41300	Safety PIN Grant	9148	
229		Medicare	41305	Safety PIN Grant	9148	
250		Operating Supplies	42195	Safety PIN Grant	9148	
747		Mileage	43130	Safety PIN Grant	9148	
18,000.00						
<b>ORIGINAL AMOUNT</b>		<b>If Prior Add'l Appropriation Was Approved This Year</b>	<b>Can Transfers Be Effected</b>		<b>APPROVED BY COUNCIL</b>	
Approp.	Unspent as of Request Date		YES	NO	Amount	Date
0.00						

**REASON FOR REQUEST (Be Specific)** Setting budget for additional money provided in the grant.

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Concetta Sanfilippo  
Signature of Department Head

**ELKHART COUNTY**  
**APPROPRIATION REDUCTION REQUEST**

10/25/2022  
**DATE**

Highway / Cum Bridge  
**DEPARTMENT/FUND NAME**

1135/980  
**FUND NO./DEPT. NO.**

AMOUNT OF REDUCTION	PROJ. NO.	ACCOUNT/PROJECT NAME	ACCT. NO.	FUND NAME	FUND NO.
5249.55	180013	Bridge Inspections	44600	m Bridge	1135
5,249.55					

ORIGINAL AMOUNT OF APPROPRIATION	DATE OF APPROP.	APPROVED BY COUNCIL	BY	
			Amount	Date
0.00				

**REASON FOR REDUCTION (BE**

1. 2018-2021 Bridge Inspection contract is complete.

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 Charlie McKenzie, P.E.

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

10/31/2022  
**DATE**

Extension/General Fund  
**DEPARTMENT/FUND NAME**

1000/0145  
**FUND NO & DEPT NO.**

**TRANSFER FROM**

(1#)	(2)				(6)	
ORIGINAL BUDGET	AMOUNT TO BE TRANSFERRED	AMOUNT SPENT TO DATE	ACCT. NO.	ACCOUNT/PROJECT NAME	PREVIOUS ACTION *T/A & DATE	REVISED BUDGET (Col. #1 Less #2, (+ or -) #6
\$2,500.00	1,971.00	\$250.00	42380	Capital Supplies	7/11/22 \$250	\$279.00
2						
3						
4						
5						
6						
7						
8						
<b>TOTAL \$</b>		<b>1,971.00</b>				

**TRANSFER TO**

(1#)	(2)				(6)	
ORIGINAL BUDGET	AMOUNT TO BE TRANSFERRED	AMOUNT SPENT TO DATE	ACCT. NO.	ACCOUNT/PROJECT NAME	PREVIOUS ACTION *T/A & DATE	REVISED BUDGET (Col. #1 Less #2, (+ or -) #6
\$0.00	1,971.00	250.00	44515	Office furniture	7/11/22 \$250	\$1,721.00
2						
3						
4						
5						
6						
7						
8						
<b>TOTAL \$</b>		<b>1,971.00</b>				

**REASON FOR TRANSFER (BE SPECIFIC)** Transfer requested to pay for replacement office furniture for Educator use.

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

10/24/2022  
**DATE**

Community Corrections  
**DEPARTMENT/FUND NAME**

1130.0981  
**FUND NO & DEPT NO.**

**TRANSFER FROM**

(1#)	(2#)				(6#)	
ORIGINAL BUDGET	AMOUNT TO BE TRANSFERRED	AMOUNT SPENT TO DATE	ACCT. NO.	ACCOUNT/PROJECT NAME	PREVIOUS ACTION *T/A & DATE	REVISED BUDGET (Col. #1 Less #2, (+ or -) #6)
10000	6,354.00	1945.06	43110	Travel/Training	700 6/10/22	1946
					1000 9/15/2022	
1000	725.00	1274.01	43130	Mileage	1000 9/15/2022	1275
8000	1,905.00	6094.3	43140	Telephone		6095
20000	3,502.00	16497.89	43630	Equipment Leasing		16498
<b>TOTAL \$</b>		12,486.00				

**TRANSFER TO**

(1#)	(2#)				(6#)	
ORIGINAL BUDGET	AMOUNT TO BE TRANSFERRED	AMOUNT SPENT TO DATE	ACCT. NO.	ACCOUNT/PROJECT NAME	PREVIOUS ACTION *T/A & DATE	REVISED BUDGET (Col. #1 Less #2, (+ or -) #6)
76496	12,486.00	69,447.28	41400	PERF		88982
2						
3						
4						
5						
6						
7						
8						
<b>TOTAL \$</b>		12,486.00				

**REASON FOR TRANSFER (BE** Monies needed to cover benefit overruns due to county approved salary increases and amount awarded from IDOC

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 Karen Chandler



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

10/6/2022  
**DATE**

Community Corrections  
**DEPARTMENT/FUND NAME**

1130.0981  
**FUND NO & DEPT NO.**

**TRANSFER FROM**

(1#)	(2)				(6)	
ORIGINAL BUDGET	AMOUNT TO BE TRANSFERRED	AMOUNT SPENT TO DATE	ACCT. NO.	ACCOUNT/PROJECT NAME	PREVIOUS ACTION *T/A & DATE	REVISED BUDGET (Col. #1 Less #2, (+ or -) #6)
250	30.00	220	43150	Printing		220
2500	885.00	975	43800	Dues & Subscriptions	(500) 6/10/22	885
5000	437.00	4563	43830	Education & Conference		4563

**TOTAL \$** 1,352.00

**TRANSFER TO**

(1#)	(2)				(6)	
ORIGINAL BUDGET	AMOUNT TO BE TRANSFERRED	AMOUNT SPENT TO DATE	ACCT. NO.	ACCOUNT/PROJECT NAME	PREVIOUS ACTION *T/A & DATE	REVISED BUDGET (Col. #1 Less #2, (+ or -) #6)
111377	1,352.00	141,256.76	41115	Supervisors & Admin	2841 10/6/22	115570
2						
3						
4						
5						
6						
7						
8						

**TOTAL \$** 1,352.00

**REASON FOR TRANSFER (BE** Monies needed to cover salary overruns due to county approved salary incre  
and amount awarded from IDOC

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

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Community Corrections

1130.0981

DATE

DEPARTMENT/FUND NAME

FUND NO & DEPT NO.

**TRANSFER FROM**

(1#)	(2)				(6)	
ORIGINAL BUDGET	AMOUNT TO BE TRANSFERRED	AMOUNT SPENT TO DATE	ACCT. NO.	ACCOUNT/PROJECT NAME	PREVIOUS ACTION *T/A & DATE	REVISED BUDGET (Col. #1 Less #2, + or -) #6
25000	111.00	24888.22	42090	Office Supplies		24889
3000	1,739.00	1260.09	42180	Medical Supplies		1261
10000	4.00	9995.59	42195	Operating Supplies		9996
3300	194.00	3105.7	42210	Repair		3106
500	383.00	116.72	42320	Training Materials		117
156000	13.00	156686.59	43090	Professional Services	700 6/10/2022	156687
500	397.00	602.16	43120	Postage	500 6/10/2022	603

TOTAL \$ 2,841.00

**TRANSFER TO**

(1#)	(2)				(6)	
ORIGINAL BUDGET	AMOUNT TO BE TRANSFERRED	AMOUNT SPENT TO DATE	ACCT. NO.	ACCOUNT/PROJECT NAME	PREVIOUS ACTION *T/A & DATE	REVISED BUDGET (Col. #1 Less #2, + or -) #6
111377	2,841.00	141,256.76	41115	Supervisors & Admin		114218
2						
3						
4						
5						
6						
7						
8						

TOTAL \$ 2,841.00

**REASON FOR TRANSFER (BE SPECIFIC)** Monies needed to cover salary overruns due to county approved salary increases and amount awarded from IDOC

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

11/1/2022  
**DATE**

Election Board  
**DEPARTMENT/FUND NAME**

1143-190  
**FUND NO & DEPT NO.**

**TRANSFER FROM**

(1#)	(2)				(6)	
ORIGINAL BUDGET	AMOUNT TO BE TRANSFERRED	AMOUNT SPENT TO DATE	ACCT. NO.	ACCOUNT/PROJECT NAME	PREVIOUS ACTION *T/A & DATE	REVISED BUDGET (Col. #1 Less #2, (+ or -) #6)
	2,052.00		43640	Rent Data Pro Equip		
<b>TOTAL \$</b>	2,052.00					

**TRANSFER TO**

(1#)	(2)				(6)	
ORIGINAL BUDGET	AMOUNT TO BE TRANSFERRED	AMOUNT SPENT TO DATE	ACCT. NO.	ACCOUNT/PROJECT NAME	PREVIOUS ACTION *T/A & DATE	REVISED BUDGET (Col. #1 Less #2, (+ or -) #6)
	2,052.00		44510	Other Equipment		
<b>TOTAL \$</b>	2,052.00					

**REASON FOR TRANSFER (BE SPECIFIC)** Transfer necessary to pay invoice for security lock on Election Board Storage Area.

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

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Health

1159-340

DATE

DEPARTMENT/FUND NAME

FUND NO & DEPT NO.

**TRANSFER FROM**

(1#)	(2)				(6)	
ORIGINAL BUDGET	AMOUNT TO BE TRANSFERRED	AMOUNT SPENT TO DATE	ACCT. NO.	ACCOUNT/PROJECT NAME	PREVIOUS ACTION *T/A & DATE	REVISED BUDGET (Col. #1 Less #2, (+ or -) #6)
20,977	3,000.00	4,184.41	42090	Office Supplies		17,977.00
						0.00
						0.00
						0.00
						0.00
<b>TOTAL \$</b>		3,000.00				

**TRANSFER TO**

(1#)	(2)				(6)	
ORIGINAL BUDGET	AMOUNT TO BE TRANSFERRED	AMOUNT SPENT TO DATE	ACCT. NO.	ACCOUNT/PROJECT NAME	PREVIOUS ACTION *T/A & DATE	REVISED BUDGET (Col. #1 Less #2, (+ or -) #6)
21,850	3,000.00	\$5,914.25	43510	Maintenance/Service Contracts		24,850.00
						0.00
						0.00
						0.00
						0.00
<b>TOTAL \$</b>		3,000.00				

REASON FOR TRANSFER (BE SPECIFIC) to pay for the extended warranty for for the server at the Lincoln Center.

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Concetta Sanfilippo



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

9/28/2022  
 DATE

WIC  
 DEPARTMENT/FUND NAME

8101-312  
 FUND NO & DEPT NO.

**TRANSFER FROM**

(1#)	(2)				(6)	
ORIGINAL BUDGET	AMOUNT TO BE TRANSFERRED	AMOUNT SPENT TO DATE	ACCT. NO.	ACCOUNT/PROJECT NAME	PREVIOUS ACTION *T/A & DATE	REVISED BUDGET (Col. #1 Less #2, (+ or -) #6
157,548	1,530.00	109,497.38	41135	Paraprofessional	(\$1,000.00)	155,018.00
265,631	\$10,844.00	197,114.32	41310	Group Insurance	\$0.00	254,787.00
						0.00
						0.00
						0.00
<b>TOTAL \$</b>	<b>12,374.00</b>					

**TRANSFER TO**

(1#)	(2)				(6)	
ORIGINAL BUDGET	AMOUNT TO BE TRANSFERRED	AMOUNT SPENT TO DATE	ACCT. NO.	ACCOUNT/PROJECT NAME	PREVIOUS ACTION *T/A & DATE	REVISED BUDGET (Col. #1 Less #2, (+ or -) #6
8,141	5,987.00	\$9,554.06	42195	Other Operating Supp	\$3,889.00	18,017.00
13,150	\$1,804.00	\$9,260.23	42180	Medical Supplies	-\$3,889.00	11,065.00
0	\$3,789.00	\$0.00	44510	Other Equipment	\$0.00	3,789.00
0	\$479.00	\$0.00	44535	Data Process Hardwa	\$0.00	479.00
0	315.00	0.00	42380	Capital supplies	0	315.00
<b>TOTAL \$</b>	<b>12,374.00</b>					

**REASON FOR TRANSFER (BE**

Received approval on 9/19/22 form State WIC Office, to move salary and fringe to cover supplies and equipment needed. Item to be purchase are:

scales and breast pumps to replace items that are old or broken. To purchase portable printer for hospital certification.

Concetta Sanfilippo

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

#####

DATE

Dental Program Income  
 DEPARTMENT/FUND NAME

8178-614  
 FUND NO & DEPT NO.

**TRANSFER FROM**

(1#)	(2#)	AMOUNT	ACCT.	ACCOUNT/PROJECT	PREVIOUS	REVISD
ORIGINAL	AMOUNT TO BE	SPENT TO	NO.	NAME	ACTION	BUDGET (Col. #1
BUDGET	TRANSFERRED	DATE			*T/A & DATE	Less #2, (+ or -) #6
32,500	6,387.00	4,376.38	42180	Medical Supplies	(\$11,115.00)	14,998.00
						0.00
						0.00
						0.00
						0.00
<b>TOTAL \$</b>		<b>6,387.00</b>				

**TRANSFER TO**

(1#)	(2#)	AMOUNT	ACCT.	ACCOUNT/PROJECT	PREVIOUS	REVISD
ORIGINAL	AMOUNT TO BE	SPENT TO	NO.	NAME	ACTION	BUDGET (Col. #1
BUDGET	TRANSFERRED	DATE			*T/A & DATE	Less #2, (+ or -) #6
0	6,387.00	\$3,617.10	44545	Other office Equipme	\$3,700.00	10,087.00
						0.00
						0.00
						0.00
						0.00
<b>TOTAL \$</b>		<b>6,387.00</b>				

REASON FOR TRANSFER (BE SPECIFIC) to cover cost of updating dental equipment.

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Concetta Sanfilippo

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

#####  
 DATE

Site  
 \_\_\_\_\_  
 DEPARTMENT/FUND NAME

8904-981  
 FUND NO & DEPT NO.

**TRANSFER FROM**

(1#)	(2#)				(6#)	
ORIGINAL BUDGET	AMOUNT TO BE TRANSFERRED	AMOUNT SPENT TO DATE	ACCT. NO.	ACCOUNT/PROJECT NAME	PREVIOUS ACTION *T/A & DATE	REVISED BUDGET (Col. #1 Less #2, (+ or -) #6
100,000	22,680.00	123,380.00	43090	other services	\$100,000.00	177,320.00
						0.00
						0.00
						0.00
						0.00

**TOTAL \$** 22,680.00

**TRANSFER TO**

(1#)	(2#)				(6#)	
ORIGINAL BUDGET	AMOUNT TO BE TRANSFERRED	AMOUNT SPENT TO DATE	ACCT. NO.	ACCOUNT/PROJECT NAME	PREVIOUS ACTION *T/A & DATE	REVISED BUDGET (Col. #1 Less #2, (+ or -) #6
0	22,680.00	\$0.00	42180	Medical Supplies		22,680.00
						0.00
						0.00
						0.00
						0.00

**TOTAL \$** 22,680.00

**REASON FOR TRANSFER** To purchase kits for the testing sites.  
 (BE SPECIFIC) \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

\_\_\_\_\_  
 Concetta Sanfilippo



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

DATE 10/27/2022 DEPARTMENT HPPCS 9122-980  
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)
1	6,862	18.00	1,952.97	41120 Professional	(\$3,580.00)	3,264
2						
3						
4						
5						
6						
7						
8						
TOTAL \$		\$18.00				

**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	18.00	\$0.00	42195 Operating Supplies	\$0.00	18
2						
3						
4						
5						
6						
7						
8						
TOTAL \$		\$18.00				

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Transfer is to cover pregnancy tests for Healthy Babies program.

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