	DATE: January 1	7, 2018	DEPA	KIMENI	C	ommissione	ers	1000/130
						NAME		NUMBER
	AMOUNT	PROJ.			ACCT.	FUND	NAME	FUND
	REQUESTED	NO.	ACCOUNT/P	ROJECT NAME	NO.			NO
1	565.00		Dues Nationa	al & State	43800	Genera	al Fund	1000
2								
3								
4								
5								
6								
7								
8								
TOTAL	565.00							
			If Pri	or Add'l				
	ORIGINAL AMOL	INT	Appr	opriation	Can	Transfers	APPRO	OVED
	Approp.	as of	=	Approved	Be	Effected	B	
		Date	1	is Year		ziicotcu	coul	
			AMOUNT	DATE	YES	NO	Amount	Date
			7	DATE	165	110	Aillouit	Date
REASO	N FOR REQUEST	Refund for	overpayment	to the Greater El	khart Chamb	per of Comm	nerce.	
To be h	eard February 10	. 2018						
		, 20101						

1/22/2018		DEPARTMENT		Planning		1000-132
				NAME		NUMBER
	PROJ.		ACCT.	FUND	NAME	FUND
AMOUNT REQUESTED	NO.	ACCOUNT/PROJECT NAME	NO.			NO
1 \$20,000.00		Other Profressional Services	43090	Gener	al Fund	1000
2						
3						
4						
5						
6						
7						
8						
TOTAL \$ 20,000.00						
		If Prior Add'l				
ORIGINAL AMOUNT		Appropriation	Can	Transfers	APPRO	OVED
Approp. Unspent	as of	Was Approved	Be	Effected	BY	
Request	Date	This Year			COU	NCIL
		AMOUNT DATE	YES	NO	Amount	Date
1						
2						
3						
4						
5						
6						
7						
8						
TOTAL \$						
REASON FOR REQUES	ST	Expenses for a job specific co	ontractor to d	ocument an	d write proce	esses
		for our routine operations				

1/24/2018		DEPA	RTMENT	Circu	uit Court Ju	enile	1000-161
					NAME		NUMBER
AMOUNT REQUESTED	PROJ.	ACCOUNT/DD	OJECT NAME	ACCT.	FUND	NAME	FUND
	NO.		OJECT NAME	NO.			NO
5000		Medical Servi	ce	43020	Ger	neral	1000
2							
3							
5							
6							
7							
8							
5,000							
3,000							
ORIGINAL AMOUNT			or Add'l opriation	Can	Transfers	APPRO	OVED
Approp. Unspent	as of	Was A	Approved	Be	Effected	B\	
Request	Date	1	s Year			COU	
		AMOUNT	DATE	YES	NO	Amount	Date
1							
2							
3							
4							
5							
6							
7							
8							
TOTAL \$							

REASON FOR REQUEST	Need updated competency evaluation on 14 year old charged with Murder (she
was 12 at the time of charging Information). Sh	e has been at the State Mental Hospital for 2 years and recently a Dr
evaluated her and indicated she is competent.	This request for additional appropriation is for a second Dr to complete
an updated evaluation. This amount is just an a	pproximate based upon his last invoice from 2 years ago.
The Court did not receive this Dr.'s invoice until	2018 - previously asked for appropriation in October 2017

	DATE: 01-24-18		DEPARTMENT		Highway		1112-980
					NAME		NUMBER
	F						
	AMOUNT	PROJ.		ACCT.	FUND	NAME	FUND
	REQUESTED	NO.	ACCOUNT/PROJECT NAME	NO.			NO
1	375,000	180011	Fiber Construction	44600	E	DIT	1112
2							
3							
4							
5							
6 7							
8							
TOTAL	375,000						
	0.0,000			+			
	-		If Prior Add'l				
	ORIGINAL AMOUNT		Appropriation	Can	Transfers	APPRO	OVED
	Approp. Unspent	as of	Was Approved				
	Request	Date	This Year		Encolou		
				VES	NO		
			7.1.12	1.20		Amount	Dute
	1.						
				nnection alon	g various pai	rts of the Cou	inty.
Fiber pro	oject in conjunction with	Jimtown a	nd Concord schools.				
		1. Funds	AMOUNT DATE	COUN		Date	

1/4/2018

		DEPARTMENT		Auditor		1114-980
				NAME		NUMBER
	PROJ.		ACCT.			FUND
AMOUNT REQUESTED	NO.	ACCOUNT/PROJECT NAME	NO.	FUND	NAME	NO
\$1,025,918.00		Transfer	45100	Spec	ial LIT	1114
\$1,025,918.00						
ORIGINAL AMOUNT		If Prior Add'I Appropriation	Can	Transfers	APPRO	OVED
	,	4				
Approp. Unspent	as of	Was Approved	Be	Effected	B	
Request	Date	This Year			cou	NCIL
		AMOUNT DATE	YES	NO	Amount	Date
\$5,859,854	1/1/2018			X		
				1		
TOTAL \$						
TOTAL						
REASON FOR REQUEST	The additio	nal transfer is to pay the bond	l payment for	the Juvenil	e Detention	
	Facility whi	ch was approved after the bu	dgets were co	mpleted.		

DATE: <u>12/19/2017</u>

DEPARTMENT

Elkhart County Emergency Planning Committee (LEPC)

NAME

**NUMBER** 

AMOUNT REQUESTED	PROJ.		ACCT.	FUND	NAME	FUND
	NO.	ACCOUNT/PROJECT NAME	NO.			NO
\$350.00		Copy Supplies	42030	LE	PC	1152
\$25.00		Photographic Supplies	42050	LE	PC	1152
\$500.00		Other Office Supplies	42090	LE	PC	1152
\$100.00		Fuel	42110	LE	PC	1152
\$500.00		clothing	42160	LE	PC	1152
\$3,500.00		Operating Supplies	42195	LE	PC	1152
\$1,000.00		Food	42310	LE	PC	1152
\$200.00		Training Supplies	42320	LE	PC	1152
Subtotal \$6,17	75.00					
ORIGINAL AMOUNT Approp. Unspent Request	as of Date	If Prior Add'I Appropriation Was Approved This Year	Can Be	Transfers Effected	APPRO BY COU	1
		AMOUNT DATE	YES	NO	Amount	Date
1						
2						
3			-			
4						
5						
6			10.			
7						
8						
TOTAL \$						

REASON FOR REQUEST	Total appropriation request \$115,350			

DATE: <u>12/19/2017</u>

DEPARTMENT

Elkhart County Emergency Planning Committee (LEPC)

NAME NUMBER

	PROJ.			ACCT.	ELIND	NAME	FUND
AMOUNT REQUESTED	NO.	ACCOUNT/PR	OIECT NAME	NO.	FOND	INVINE	NO
\$100.00	110.	Other Supplies		42370		DO	
						PC	1152
\$1,000.00		Capital Supply		42380		PC	1152
\$3,000.00		Data Processing		43050	LE	PC	1152
\$25,000.00		Other Profession	al Services	43090	LE	PC	1152
\$8,000.00		Sustenance		43110	LE	PC	1152
\$200.00		Postage		43120	LE	PC	1152
\$3,000.00		Travel Expenses	(Mileage)	43130	LE	PC	1152
\$3,500.00		Telephone Expe	rses	43140	LE	PC	1152
Sub TOTAL \$43,	800.00						
ORIGINAL AMOUNT Approp. Unspent Request	as of Date	Appro Was A Thi	or Add'l opriation oproved s Year		Transfers Effected	APPRO BY COUI	,
		AMOUNT	DATE	YES	NO	Amount	Date
1							
2							
3							
4							
5							
6							
7							
8							
TOTAL \$							

REASON FOR REQUEST	Total appropriation request \$115,350				

PAGE 3

DATE: <u>12/19/2017</u>

DEPARTMENT

Elkhart County Emergency Planning Committee (LEPC)

**NAME** 

**NUMBER** 

	I===:					
AMOUNT REQUESTED	PROJ.		ACCT.	FUND	NAME	FUND
	NO.	ACCOUNT/PROJECT NAME	NO.			NO
\$500.00		Printing Other	43200	LE	PC	1152
\$100.00		Publishing legal	43210	LE	PC	1152
\$50.00		Photo Processing	43150	LE	PC	1152
\$200.00		Maintenance CTR	43510	LE	PC	1152
\$300.00		Equipment Repair	43550	LE	PC	1152
\$500.00		Equipment Rental	43610	LE	PC	1152
\$325.00		Car Rental	43620	LE	PC	1152
\$2,000.00		Awards & grants	43920	LE	PC	1152
Sub TOTAL \$ 3,9	975.00					
ORIGINAL AMOUNT Approp. Unspent Request	as of Date	If Prior Add'l Appropriation Was Approved This Year		Transfers Effected	APPRO BY COUI	1
		AMOUNT DATE	YES	NO	Amount	Date
1						
2						
3						
4						
5						
6						
7						
8						
TOTAL \$						

KEASON FOR REQUEST	l otal appropriation request \$115,350				

PAGE 4

DATE: <u>12/19/2017</u>

DEPARTMENT

Elkhart County Emergency Planning Committee (LEPC)

NAME NUMBER

	IDDOL		Lean			
AMOUNT REQUESTED	PROJ.		ACCT.	FUND	NAME	FUND NO
	NO.	ACCOUNT/PROJECT NAME	NO.			
\$400.00		Subscriptions	43805	LE	PC	1152
\$15,000.00		Conference cost & Ed fees	43830	LE	PC	1152
\$10,000.00		Training Programs	43835	LE	PC	1152
\$25,000.00		Other Equipment	44510	LE	PC	1152
\$1,000.00		Copier Purchase	44530	LE	PC	1152
\$6,000.00		Data Hardware	44535	LE	PC	1152
\$2,000.00		Data Software	44540	LE	PC	1152
\$2,000.00		Other Office Equipment	44545	LEPC		1152
Sub TOTAL \$61,	400.00					
ORIGINAL AMOUNT Approp. Unspent Request	as of Date	If Prior Add'l Appropriation Was Approved This Year	Can Be	Can Transfers APPRO Be Effected BY		
		AMOUNT DATE	YES	NO	Amount	Date
1						
2						
3						
4						
5						
6						
7						
8						
TOTAL \$						

REASON FOR REQUEST	Total appropriation request \$115,350			

 DATE: 01-24-18
 DEPARTMENT
 Highway
 1176-980

 NAME
 NUMBER

	AMOUNT	PROJ.		A COT	FUND	11111	
				ACCT.	FUND	NAME	FUND
	REQUESTED	NO.	ACCOUNT/PROJECT NAME	NO.			NO
1	3,000,000	180008	Road Const & Maint	44600	Motor Vehicle	Highway	1176
2	250,000	180009	Tandem Axle Dump Truck		Motor Vehicle		1176
3	525,000	180010	Bridge 141 Construction		Motor Vehicle		1176
4							
5							
6							
7							
8							
TOTAL	3,775,000						
			If Prior Add'l				
	ORIGINAL AMOUNT		Appropriation	Can	Transfers	APPRO	OVED
	Approp. Unspent	as of					
			Was Approved	ве	Effected	B\	
	Request	Date	This Year			COU	VCIL
			AMOUNT DATE	YES	NO	Amount	Date

REASON FOR REQUEST	Funds for Road paving program. Funds may be used for resurfacing and preparations
	traffic paint, police workzone patrol, etc.)
2. Funds to replace a 2003 Sterling Tand	em Axle Dump Truck
3. Funds replace bridge # 141 (CR 3 s. of	CR 22 over Baugo Creek) Council approved \$600,000 appropriation
last month. Bid came in less than \$484,0	06.93. New project account is requested for less money.

1/22/2018	18 DEPARTMENT		U	1207-980			
			NAME			NUMBER	
	PROJ.		ACCT.		-	FUND	
AMOUNT REQUESTED	NO.	ACCOUNT/PROJECT NAME	NO.	FUND NAME		NO	
1 \$ 3,307.00		Other Profressional Services	43090	Unsafe	Building	1207	
2							
3							
4							
5							
6							
7							
8							
TOTAL \$ 3,307.00							
ORIGINAL AMOUNT Approp. Unspent Request	as of Date	If Prior Add'I Appropriation Was Approved This Year	Be Effected E		В	ROVED BY UNCIL	
		AMOUNT DATE	YES	NO	Amount	Date	
1					1		
2							
3							
4							
5							
6							
7							
8							
TOTAL \$							
REASON FOR REQUES	ST.	Expenses for contractors to rep	pair or demo	lish unsafe t	ouildings		

1/3/2018

DEPARTMENT	Auditor Ineligible Deduction Fund	1216-980	
	NAME	NUMBER	

AMOUNT REQUESTED	PROJ.	ACCOUNT/D	ROJECT NAME	ACCT.	FUND NAME		FUND	
			NOJECT IVAIVIE		A 111	12. 21. 1	NO	
\$5,505		Tax Refund		43870	Auditor	Ineligible	1216	
		_						
	-	_						
\$5,505								
ORIGINAL AMOUNT	×		or Add'l opriation	Can	Transfers APPR		PROVED	
Approp. Unspent	as of		Approved		Effected		BY COUNCIL	
Request	Date		is Year	De	Lifected			
	Dute	AMOUNT	DATE	YES	NO	Amount		
0	_	AMOUNT	0	TES		Amount	Date	
			0		Х			
		-						
TOTAL \$								

REASON FOR REQUEST	To reimburse County General for a Refund that was taken out of County				
	General at Settlement time and the original payment went into Auditor				
	Ineligible Fund.				

1/22/2018		DEPARTMENT		Millersburg	II	4503-980	
				NAME		NUMBER	
	PROJ.		ACCT.	FUND	NAME	FUND	
AMOUNT REQUESTED	NO.	ACCOUNT/PROJECT NAME	NO.				
1 \$ 2,000.00		Administrative Fees	43890	Miller	Millersburg II		
2 \$ 500.00		Other Professional Services	43090	Miller	sburg II	4503	
3 \$ 19,790.00		Refunds and Other	43850	Miller	sburg II	4503	
4							
5							
6							
7							
8							
TOTAL \$ 22,290.00							
ORIGINAL AMOUNT Approp. Unspent Request	as of Date	If Prior Add'I Appropriation Was Approved This Year	Can Transfers Be Effected		ВУ	APPROVED BY COUNCIL	
		AMOUNT DATE	YES	NO	Amount	Date	
1							
2							
3							
4							
5							
6							
7							
8							
TOTAL \$							
REASON FOR REQUE	ST	Annual expense reimburseme	nt fees to co	over staff/ad	ministrative e	expense	
		Umbaugh TIF neutralization					
		Town of Millersburg debt payn	nent for sew	er plant exp	ansion		

1/22/2018		DEPARTMENT	North	West Gatev	vay TIF	4504-980	
				NAME		NUMBER	
	PROJ.		ACCT.	FUND	FUND NAME		
AMOUNT REQUESTED	NO.	ACCOUNT/PROJECT NAME	NO.				
1 \$50,000.00		Administrative Fees	43890	NorthWe	st Gateway	4504	
2 \$ 500.00		Other Professional Services	43090	NorthWe	st Gateway	4504	
3							
4							
5							
6							
7							
8							
TOTAL \$ 50,500.00							
		If Prior Add'l					
ORIGINAL AMOUNT		Appropriation	Can	Transfers	APPRO	OVED	
Approp. Unspent	as of	Was Approved	Ве	Effected	В	,	
Request	Date	This Year	cou			JNCIL	
		AMOUNT DATE	YES	NO	Amount	Date	
1	ï						
2							
3							
4							
5							
6							
7							
8							
TOTAL \$							
REASON FOR REQUE	ST	Annual expense reimburseme Umbaugh TIF neutralization	nt fees to co	over staff/ad	ministrative e	expense	

DEPARTMENT	South Benton TIF			4505-980			
	NAME			NUMBER			
	ACCT.	FUND	NAME	FUND			
ACCOUNT/PROJECT NAME	NO.			NO			
Administrative Fees	43890	South	Benton	4505			
Other Professional Services	43090	South	Benton	4505			
Refunds and Other	43850	South	Benton	4505			
If Prior Add'l Appropriation Was Approved				ROVED BY			
				INCIL			
AMOUNT DATE	YES	NO	Amount	Date			
REASON FOR REQUEST  Annual expense reimbursement fees to cover staff/administrative expense							
Tomi or ogradude debt payment i	or sevici allu	water Cornie	cra her interio	Cal			
	ACCOUNT/PROJECT NAME Administrative Fees Other Professional Services Refunds and Other  If Prior Add'I Appropriation Was Approved This Year AMOUNT DATE  Annual expense reimbursement for Umbaugh TIF neutralization	ACCOUNT/PROJECT NAME  Administrative Fees  A3890  Other Professional Services  Refunds and Other  If Prior Add'I Appropriation Was Approved This Year  AMOUNT DATE  AMOUNT DATE  Annual expense reimbursement fees to cover so	ACCOUNT/PROJECT NAME  ACCT. FUND  ACCOUNT/PROJECT NAME  Administrative Fees  A3890 South  Other Professional Services  Refunds and Other  If Prior Add'I  Appropriation  Was Approved  This Year  AMOUNT DATE  Annual expense reimbursement fees to cover staff/administ  Umbaugh TIF neutralization	NAME  ACCOUNT/PROJECT NAME  ACCT. FUND NAME  NO.  Administrative Fees 43890 South Benton  Other Professional Services 43090 South Benton  Refunds and Other 43850 South Benton  If Prior Add'I Appropriation  Was Approved This Year  AMOUNT DATE YES NO Amount  Annual expense reimbursement fees to cover staff/administrative expens			

1/22/2018		DEPARTMENT	Western Gateway TIF			4506-980	
			NAME			NUMBER	
	PROJ.		ACCT.	FLIND	NAME	FUND	
AMOUNT REQUESTED	NO.	ACCOUNT/PROJECT NAME	NO.	FUND NAME		NO	
1 \$500.00	<u> </u>	Administrative Fees	43890	Wester	n Gateway	4506	
2 \$ 500.00		Other Professional Services	43090		n Gateway	4506	
3 \$5,547.00	1	Refunds and Other	43850		n Gateway	4506	
4							
5							
6							
7							
8							
TOTAL \$ 6,547.00							
ORIGINAL AMOUNT Approp. Unspent	as of	If Prior Add'I Appropriation Was Approved				ROVED BY	
Request	Date	This Year				UNCIL	
		AMOUNT DATE	YES	NO	Amount	Date	
1							
2							
3							
4							
5							
6 7							
8							
TOTAL \$			1				
REASON FOR REQUES	ST	Annual expense reimbursement Umbaugh TIF neutralization	fees to cover	staff/adminis	strative expens	e	
Debt payment to the County Environmental Special Projects fund for a water and							
sewer expansion to American Countryside and Jail.							

1/22/2018		DEPARTMENT	Middlebury Ag TIF			4508-980	
				NAME		NUMBER	
	1						
	PROJ.		ACCT.	FUND	NAME	FUND	
AMOUNT REQUESTED	NO.	ACCOUNT/PROJECT NAME	NO.			NO	
1 \$2,000.00		Administrative Fees	43890	Middle	bury Ag	4508	
2 \$ 500.00		Other Professional Services	43090	Middle	bury Ag	4508	
3 \$40,400.00		Refunds and Other	43850	Middle	bury Ag	4508	
4							
5							
6							
7							
8							
TOTAL \$ 42,900.00							
ORIGINAL AMOUNT Approp. Unspent	as of	If Prior Add'I Appropriation Was Approved	Can Be	Transfers Effected	APPRC BY		
Request	Date	This Year			COUN	JNCIL	
		AMOUNT DATE	YES	NO	Amount	Date	
1							
2							
3							
4							
5							
6							
7							
8							
TOTAL \$							
REASON FOR REQUES	т	Annual expense reimburseme	nt fees to co	over staff/ad	ministrative e	expense	
		Umbaugh TIF neutralization					
		Conservation easement payme	ents to 2 lan	d owners			

1/22/2018 DEPARTMENT			Mid	4509-980			
				NAME		NUMBER	
	PROJ.		ACCT.	FUND	NAME	FUND	
AMOUNT REQUESTED	NO.	ACCOUNT/PROJECT NAME	NO.			NO	
1 \$10,000.00		Administrative Fees	43890	Middle	bury SE	4509	
2 \$ 500.00		Other Professional Services	43090	Middle	bury SE	4509	
3							
4							
5							
6							
7							
8							
TOTAL \$ 10,500.00							
		160					
ODICINIAL ANAOLINIT		If Prior Add'l					
ORIGINAL AMOUNT		Appropriation	Can	Transfers		APPROVED	
Approp. Unspent	as of	Was Approved				BY	
Request	Date	This Year				COUNCIL	
		AMOUNT DATE	YES	NO	Amount	Date	
1							
2							
3							
5							
6							
7							
8						-	
TOTAL \$							
TOTAL \$		<u> </u>					
REASON FOR REQUES	r	Annual expense reimburseme	nt fees to co	over staff/ad	ministrative	expense	
		Umbaugh TIF neutralization					

1/22/2018		DEPARTMENT	Mid	Middlebury East TIF			
				NAME		4510-980 NUMBER	
	PROJ.		ACCT.			FUND	
AMOUNT REQUESTED	NO.	ACCOUNT/PROJECT NAME	NO.	ELINIT	NAME	FUND NO	
1 \$10,000.00	1101	Administrative Fees	43890				
2 \$ 500.00	_	Other Professional Services	43090		oury East	4510	
3 \$310,273.00	+		43090	+	oury East	4510	
4	_	Refunds and Other	43830	Middlet	oury East	4510	
5	+		_				
6			-				
7	+						
8			+				
TOTAL \$ 320,773.00			+				
7 520,110.00							
		If Prior Add'l					
ORIGINAL AMOUNT		Appropriation	Can	Transfers	APPRO	OVED	
Approp. Unspent	as of	Was Approved		Effected	B		
Reques		This Year	Ве	Effected	COU		
ricques	t Date		VEC	T 110			
1		AMOUNT DATE	YES	NO	Amount	Date	
2							
3			_				
4			_				
5							
6							
7							
8							
TOTAL \$			_				
TOTAL \$							
REASON FOR REQUE	ST	Annual evnence reimburgemen	t food to cover	ataff/admi-i-	landing our		
		Annual expense reimbursemen Umbaugh TIF neutralization	it lees to cover	stan/adminis	irative expens	se	
		Debt payment to the Town of M	liddlobury for o	was plant av	noncies		

 1/22/2018
 DEPARTMENT
 CR 6&17 NE TIF
 4511-980

 NAME
 NUMBER

	PROJ.		ACCT.	FUND	NAME	FUND
AMOUNT REQUESTED	NO.	ACCOUNT/PROJECT NAME	NO.			NO
1 \$ 100,000.00		Administrative Fees	43890	CR 6&	17 NE TIF	4511
2 \$ 500.00		Other Professional Services	43090	CR 6&	17 NE TIF	4511
3 \$ 89,000.00		Refunds and Other	43850	CR 6&	17 NE TIF	4511
4 \$ 150,000.00		Transfer Between Funds	45100	CR 6&	17 NE TIF	4511
5 \$ 37,000.00	182501	Construction/Reconstruction	44600	CR 6&	17 NE TIF	4511
6 \$ 300,000.00	182502	Construction/Reconstruction	44600	CR 6&	17 NE TIF	4511
7 \$ 75,000.00	182503	Construction/Reconstruction	44600	CR 6&	17 NE TIF	4511
8						
TOTAL \$ 751,500.00						
ORIGINAL AMOUNT Approp. Unspent Request	as of Date	If Prior Add'I Appropriation Was Approved This Year	Can Transfers Be Effected		APPROVED BY COUNCIL	
		AMOUNT DATE	YES	NO	Amount	Date
1						
2						
3						
4						
5						
6						
7						
8						

REASON FOR REQUEST	Annual expense reimbursement fees to cover staff/administrative expense				
	Umbaugh TIF neutralization				
	Reimbursement payment to the Bob Schrock for Beck Dr. Sewer extension				
	Bi-Annual bond payment				
	Design/Surveying/Permiting for Project 86 water line connections in PCR				
	CR 4 reconstruction between CR 15 & CR 17				
	Fiber line extension at CR 17/US 33 to assist Concord Schools				

PROJ. NO.	ACCOUNT/PROJECT NAME  Administrative Fees  Other Professional Services  Refunds and Other	ACCT. NO. 43890 43090 43850	North North	NAME Baugo Baugo Baugo	FUND NO 4512 4512 4512	
	Administrative Fees Other Professional Services	NO. 43890 43090	North North	Baugo Baugo	NO 4512 4512	
NO.	Administrative Fees Other Professional Services	43890 43090	North	Baugo	4512 4512	
	Other Professional Services	43090	North	Baugo	4512	
	Refunds and Other	43850	North	Baugo	4512	
		Be	Effected		BY	
Date				COUN	COUNCIL	
	AMOUNT DATE	YES	NO	Amount	Date	
Т		ees to cover	staff/administ	rative expens	е	
	Umbaugh TIF neutralization					
	Debt payment to County Enviro	onmental Spe	cial Projects	for water line	extension	
	as of Date	T Annual expense reimbursement from Umbaugh TIF neutralization	Appropriation as of Was Approved Be This Year  AMOUNT DATE YES  This Year  Amount DATE YES  This Year  Annual expense reimbursement fees to cover Umbaugh TIF neutralization	Appropriation Can Transfers  Be Effected  This Year  AMOUNT DATE YES NO  Annual expense reimbursement fees to cover staff/administ Umbaugh TIF neutralization	Appropriation  Appropriation  As of Was Approved Be Effected By COUNT DATE  AMOUNT DATE  Annual expense reimbursement fees to cover staff/administrative expense	

1/22/2018 DEPARTMENT				SR 13 TIF			
			NAME		NUMBER		
PROJ.	*	ACCT.	FUND	NAME	FUND		
NO.	ACCOUNT/PROJECT NAME	NO.			NO		
	Administrative Fees	43890	SF	₹ 13	4514		
	Other Professional Services	43090	SF	R 13	4514		
-							
-							
-							
_							
	If Prior Add'l						
		Can	Transfers	ΔDDR	IVED		
as of							
		VES	NO		Date		
	AMOSKI BATE	123	110	Amount	Date		
	as of Date	NO. ACCOUNT/PROJECT NAME  Administrative Fees  Other Professional Services  If Prior Add'I Appropriation Was Approved	NO. ACCOUNT/PROJECT NAME NO.  Administrative Fees 43890 Other Professional Services 43090  If Prior Add'I Appropriation Was Approved This Year  NO.  Can Be	NO. ACCOUNT/PROJECT NAME NO.  Administrative Fees 43890 SF Other Professional Services 43090 SF  If Prior Add'I Appropriation Was Approved Date This Year	NO. ACCOUNT/PROJECT NAME NO.  Administrative Fees 43890 SR 13  Other Professional Services 43090 SR 13  If Prior Add'I Appropriation Can Transfers APPRODate This Year COUNTY		

1/17/2018

DEPARTMENT	Bond and Interest	4600-180
	NAME	NUMBER

	PROJ.			ACCT			FUND
AMOUNT REQUESTED	NO.	ACCOUNT/E	DOLECT NAME	ACCT.			FUND NO
			ROJECT NAME	NO.		FUND NAME	
\$700,000		Bond Princip		46100		Service	4600
\$325,918		Bond Interes	st	46400	Debt S	Service	4600
\$1,025,918							
				1			
		If P	rior Add'l				
ORIGINAL AMOUNT			propriation	Can	Transfers	APPRO	OVED
Approp. Unspent	as of	1	Approved		Effected	BY	
Request	Date		his Year	l be	Effected		
Nequest	Date					COU	
4		AMOUNT	DATE	YES	NO	Amount	Date
\$4,489,000	1/1/2018				X		
\$1,370,854	1/1/2018						
TOTAL \$							

REASON FOR REQUEST	The additional transfer is to pay the bond payment for the Juvenile Detention				
	Facility which was approved after the budgets were completed.				

	DATE: 01-24-18		DEPARTMENT Highway				4901-980		
						NUMBER			
	AMOUNT	PROJ.			ACCT.	FUND	NAME	FUND	
	REQUESTED	NO.	ACCOUNT/P	ROJECT NAME	NO.			NO	
1	2,000,000	180012	Road Const	& Maint	44600	Road Maint	& Const	4901	
2									
3									
4									
5									
6									
7									
8									
TOTAL	2,000,000						71-		
				ior Add'l					
	ORIGINAL AMOUNT			opriation	Can	Transfers	APPRO	OVED	
	Approp. Unspent	as of		Approved	Be	Effected	BY		
	Request	Date		is Year			COU	COUNCIL	
			AMOUNT	DATE	YES	NO	Amount	Date	
	''								
				ogram. Funds may l	be used for r	esurfacing and	preparations		
for road re	esurfacing (culverts, brush, t	raffic paint,	police workzone	patrol, etc.)					

1/22/2018	DEPA	DEPARTMENT			Redevelopment			
				NAME			NUMBER	
	PROJ.			ACCT.			FUND	
AMOUNT REQUESTED	NO.	ACCOUNT/P	ROJECT NAME	NO.	FUND	NAME	NO	
1 \$650.00		Su	stenance	43110	Redeve	elopment	4911	
2 \$ 644.00		Education	and Conference	43830	Redeve	elopment	4911	
3								
4								
5								
6								
7								
8								
TOTAL \$ 1,294.00								
		16 D.	in a Andalli					
ORIGINAL AMOUNT			ior Add'l	Com	T	A DDD	0) /ED	
			opriation	Can	Transfers	APPRO		
Approp. Unspent	as of		Approved	Be	Effected		BY	
Request	Date		is Year				UNCIL	
		AMOUNT	DATE	YES	NO	Amount	Date	
1								
2								
3 4								
5		_						
6								
7								
8								
TOTAL \$		_						
TOTAL \$								
REASON FOR REQUE	ST		hotel, meals and	travel costs				
io		Conferences	and Training					

1/22/2018		DEPARTME	NT	Weed	& Rank Veg	etation	6041-980
				NAME			NUMBER
	PROJ.			ACCT.			FUND
AMOUNT REQUESTED	NO.	ACCOUNT/PROJECT	NAME	NO.	FUND	NAME	NO
1 \$ 2,962.00		Other Profressional	Services	43090	Weed & Ran	k Vegetation	6041
3							
4							
5							
6							
7							
8							
TOTAL \$ 2,962.00							
		If Drive Adv					
ORIGINAL AMOUNT		If Prior Add		<b>C</b>	T	4000	D) (ED)
		Appropriation	The state of the s	Can	Transfers	APPRO	
Approp. Unspent	as of	Was Approv		Ве	Effected	B	
Request	Date	This Year				COU	
		AMOUNT DAT	E	YES	NO	Amount	Date
1							
2							
3							
4							
5							
6							
7							
8							
TOTAL \$							
REASON FOR REQUES	т	Expenses for contra	octors to mo	w and trim i	nuisance pro	operties	

DATE: <u>1/10/2018</u> DEPARTMENT **HEALTH-ENVIRONMENTAL** 8116-981 NAME **NUMBER** PROJ. **FUND NAME** ACCT. **FUND** AMOUNT REQUESTED NO. ACCOUNT/PROJECT NAME NO. NO \$2,000.00 42195 **RADON** Operating Supplies \$800.00 Publishing 43210 **RADON** \$200.00 43120 Postage **RADON TOTAL** \$3,000.00 If Prior Add'l **ORIGINAL AMOUNT** Appropriation **Transfers** Can **APPROVED** Unspent Approp. as of **Was Approved** Be Effected BY Request Date **This Year** COUNCIL **AMOUNT** DATE **YES** NO **Amount** Date

REASON FOR REQUEST	To disperse grant to increase radon testing by 10% in the county over the previous year.	erse grant to increase radon testing by 10% in the county over the previous year.					
		_					
		-					

TOTAL \$

1/24/2018	DEPARTMENT	Circ	Circuit Court Juvenile			
				NAME		NUMBER
	PROJ.		ACCT.	FUND	NAME	FUND
AMOUNT REQUESTED	NO.	ACCOUNT/PROJECT NAME	NO.			NO
\$15,000.00		Summit/Dual Status	43090	Court Improve	ement Grant	8122
2						
3						
4						
5						
6						
7						
8						
\$15,000						
		If Prior Add'l				
ORIGINAL AMOUNT		Appropriation	Can	Transfers	APPR	OVED
Approp. Unspent	as of	Was Approved		Effected	B.	
Request	Date	This Year		Effected	cou	
Hoquest	Dute	AMOUNT DATE	YES	NO	Amount	
1	_	AMOUNT DATE	TES	NO	Amount	Date
2	_					
3						
4						
5		_	_			
6			_			
7			_			
8						
TOTAL \$						
TOTAL W						
REASON FOR REQUES		The request is based upon a yeurseable grant for the Summit as v				State
nos Brancea uns Departine	in a remin	urseable grant for the summit as v	veil as for Dual	Status Pacilit	ators.	

	DATEDecember 20	J. 2017	DEPARTMENT	Radio	Cache Acce	es Grant	8156-980	
				<del></del>	NAME		NUMBER	
	ANAGUNE							
	AMOUNT	PROJ.		ACCT.	FUND	NAME	FUND	
	REQUESTED	NO.	ACCOUNT/PROJECT NAME	NO.			NO	
	5,300			44505	RadioEd	quipment		
TOTAL	5,300							
			If Prior Add'l					
	ORIGINAL AMOUNT		Appropriation	Can	Transfers	APPRO	OVED	
	Approp. Unspent	as of	Was Approved		Effected			
	Request	Date	This Year	l be	Effected		BY COUNCIL	
	Request	Date		1/50				
			AMOUNT DATE	YES	NO	Amount	Date	
REASC	N FOR REQUEST	100% reir	mbursable grant from IDHS	6)				
Multi b	ank charger, speaker m	ic, replace	ement batteries					
	No.							
					Thank you,	Director Je	nn	

	DATE: _December 2	0, 2017	DEPARTMENT	2017	EMPG Cor	np Funds	8157-980
					NAME		NUMBER
	AMOUNT	PROJ.		ACCT	FUND	NAME	ELINID.
	REQUESTED	NO.	ACCOUNT/PROJECT NAME	ACCT. NO.	FUND	NAME	FUND NO
	7,700		ACCOUNTY NOTECT NAME	-	Other Profess	ional Services	140
				13030	Other Fredesi	ional corridos	
TOTAL	7,700						
TOTAL	7,700			-			
			If Prior Add'l				
	ORIGINAL AMOUNT		Appropriation	Can	Transfers	APPRO	√ED
	Approp. Unspent	as of	Was Approved		Effected	ВУ	
	Request	Date	This Year			COUN	CIL
			AMOUNT DATE	YES	NO	Amount	Date
REASO	N FOR REQUEST	100% re	imbursable grant from ID	HS			
	Safety Officer Specific	Training	and ICS/NIMS 300 and 40	20			
	Jaiety Officer Specific	Trailing (	and ics/Milvis 300 and 40	<i>J</i> U			
					Thank you	Director Jenn	
					. Harrie you,	Director Jerili	

### ELKHART COUNTY APPROPRIATION REDUCTION REQUEST

	DATE: 01-23-18		DEPARTMENT		Highway		1135-980
					NAME		NUMBER
	AMOUNT	PROJ.		ACCT.	FUND	NAME	FUND
	REQUESTED	NO.	ACCOUNT/PROJECT NAME	NO.			NO
1	110,000.00		Bridge 102 design	44600	Cumulative	Bridge	1135
2	6,242.81		Equipment purchase	44600	Cumulative	Bridge	1135
3	762.50	170038	Bridge 155 Maintenace	44600	Cumulative	Bridge	1135
4							
5							
6							
7		1 2					
8							
AL	117,005.31						
	- X X X X X X X X.		If Prior Add'l				
	ORIGINAL AMOUNT		Appropriation	Can	Transfers	APPRO	OVED
	Approp. Unspent	as of	Was Approved	Ве	Effected	B	1
	Request	Date	This Year			coul	NCIL
			AMOUNT DATE	YES	NO	Amount	Date

REASON FOR REQUEST	1. Design is complete. Funds can returned to the cahs balance in the bridge funds.
2. Purchase is complete.	
3. Project is complete.	

#### ELKHART COUNTY APPROPRIATION REDUCTION REQUEST

	DATE: 01-23-18		DEPARTMENT		Highway		1176-980
					NAME		NUMBER
	AMOUNT	PROJ.		ACCT.	FUND	NAME	FUND
	REQUESTED	NO.	ACCOUNT/PROJECT NAME	NO.			NO
1	600,000.00	180006	Bridge 410 Construction	44600	Motor Vehicle	Highway	1176
2							
3							
4							
5							
6							
7							
8							
TOTAL	600,000.00						
			If Prior Add'l				
	ORIGINAL AMOUNT		Appropriation	Can	Transfers	APPRO	OVED
	Approp. Unspent	as of	Was Approved	Be	Effected	B	1
	Request	Date	This Year			COUNCIL	
			AMOUNT DATE	YES	NO	Amount	Date
	THE PERSON NAMED IN						
REASC	ON FOR REQUEST	1. Bid can	ne in less than estimated, project is r	eappropriated	l into a new pro	ject 180010.	

### ELKHART COUNTY APPROPRIATION REQUEST

	DATE: 1-08-2	2018	DEPARTMENT		WIC		8101-312
					NAME		NUMBER
		1	1K				
		PROJ.		ACCT.	FUND	NAME	FUND
<u></u>	REQUESTED	NO.	ACCOUNT/PROJECT NAME	NO.			NO
1			Education and Conference Costs	43830	W	IC	8101
2							
3							
4							
5							
6							
7							
8							
TOTAL	1,500						
	001011111111111111111111111111111111111		If Prior Add'l				
	ORIGINAL AM		Appropriation	Can	Transfers	APPRO	
	Approp.	as of	Was Approved	Be Effected		BY	
		Date	This Year			COU	
			AMOUNT DATE	YES	NO	Amount	Date
			1,112,111				
DE 400	N FOR REQU	FOT A					
KEASO	N FOR REQU	ESI- A	mount was entered twice on	ine appropri	ation requ	est.	

### REQUEST FOR TRANSFER OF APPROPRIATED FUNDS BETWEEN MAJOR CLASSIFICATION

DATE	01.28.18	DEPARTMENT		GENERAL		4000/405
	01.20.10	DEITHOLINE		NAME		1000/105 FUND/DEPT NO.
				TATAL		ONDIDEFT NO.
			TRANSFE	R FROM		
(1#)	(#2)				(#6)	
ORIGINAL	AMOUNT TO BE				PREVIOUS ACTION	REVISED BUDGET
BUDGET	TRANSFERRED	AMOUNT SPENT	ACCT.	ACCOUNT	*T/A	(Col #1 Less #2,
		TO DATE	NO.	NAME	& DATE	(+ or -) #6)
1	70,000.00		42110	FUEL & MOTOR OIL		
2						
3						
4						
5						
7						
8						
TOTAL \$	70,000,00					
TOTAL \$	70,000.00	l				
			TRANSFEI	P TO		
(1#)	(#2)		INANSFEI	K 10	(#6)	
	AMOUNT TO BE				PREVIOUS ACTION	REVISED BUDGET
BUDGET	TRANSFERRED	AMOUNT SPENT	ACCT.	ACCOUNT	*T/A	(Col #1Plus #2,
		TO DATE	NO.	NAME	& DATE	(+ or -) #6)
1	30,000.00			PRISONER TRANSPORT	G D/III	(1 01 ) #0)
2	40,000.00			MOTOR VEHICLES		
3						
4						
5						
6						
7						
8						
TOTAL \$	70,000.00					
	OR TRANSFER			e for the extradition of	inmates per court	order.
2) To make	monies available	for the purchase	of a van to	transport inmates.		
TO DE 1/2	DD EEDDING	40.0012				
	RD FEBRUARY	10 2018				

REQUEST FOR TRANSFER OF APPROPRIATED
FUNDS BETWEEN MAJOR CLASSIFICATION

DATE	22-Jan-18	DEPARTMENT	Superior Ct. 5 1000/16									
				NAME		FUND/DEPT NO.						
			TRANSF	ER FROM								
(1#)	(#2)				(#6)							
ORIGINAL	AMOUNT TO BE				PREVIOUS ACTION	REVISED BUDGET						
BUDGET	TRANSFERRED	AMOUNT SPENT	ACCT.	ACCOUNT	*T/A	(Col #1 Less #2,						
		TO DATE	NO.	NAME	& DATE	(+ ог -) #6)						
1 \$3,500.00	1,930.00	\$0.00	42090	Office Supplies								
2												
3												
4												
5												
6												
7												
8	2											
TOTAL \$	1,930.00					<del></del>						
			TRANSF	ER TO	TRANSFER TO							
(1#)	(#2)				(#6)							
ORIGINAL	(#2) AMOUNT TO BE				(#6) PREVIOUS ACTION	REVISED BUDGET						
		AMOUNT SPENT	ACCT.	ACCOUNT		REVISED BUDGET (Col #1Plus #2,						
ORIGINAL	AMOUNT TO BE	AMOUNT SPENT TO DATE	ACCT:	ACCOUNT NAME	PREVIOUS ACTION							
ORIGINAL BUDGET 1 \$0.00	AMOUNT TO BE		NO.		PREVIOUS ACTION *T/A	(Col #1Plus #2,						
ORIGINAL BUDGET 1 \$0.00	AMOUNT TO BE TRANSFERRED	TO DATE	NO.	NAME	PREVIOUS ACTION *T/A	(Col #1Plus #2,						
ORIGINAL BUDGET 1 \$0.00 2	AMOUNT TO BE TRANSFERRED	TO DATE	NO.	NAME	PREVIOUS ACTION *T/A	(Col #1Plus #2,						
ORIGINAL BUDGET 1 \$0.00 2 3	AMOUNT TO BE TRANSFERRED	TO DATE	NO.	NAME	PREVIOUS ACTION *T/A	(Col #1Plus #2,						
ORIGINAL BUDGET 1 \$0.00 2 3 4 5	AMOUNT TO BE TRANSFERRED	TO DATE	NO.	NAME	PREVIOUS ACTION *T/A	(Col #1Plus #2,						
ORIGINAL BUDGET 1 \$0.00 2 3 4 5	AMOUNT TO BE TRANSFERRED	TO DATE	NO.	NAME	PREVIOUS ACTION *T/A	(Col #1Plus #2,						
ORIGINAL BUDGET 1 \$0.00 2 3 4 5 6	AMOUNT TO BE TRANSFERRED	TO DATE	NO.	NAME	PREVIOUS ACTION *T/A	(Col #1Plus #2,						
ORIGINAL BUDGET 1 \$0.00 2 3 4 5	AMOUNT TO BE TRANSFERRED	TO DATE	NO.	NAME	PREVIOUS ACTION *T/A	(Col #1Plus #2,						
ORIGINAL BUDGET 1 \$0.00 2 3 4 5 6	AMOUNT TO BE TRANSFERRED	TO DATE 0.00	NO.	NAME	PREVIOUS ACTION *T/A	(Col #1Plus #2,						
ORIGINAL BUDGET  1 \$0.00 2 3 4 5 6 7 8	AMOUNT TO BE TRANSFERRED 1,930.00	TO DATE 0.00	NO.	NAME	PREVIOUS ACTION *T/A	(Col #1Plus #2,						
ORIGINAL BUDGET  1 \$0.00 2 3 4 5 6 7 8 TOTAL \$	AMOUNT TO BE TRANSFERRED 1,930.00	TO DATE 0.00	NO.	NAME	PREVIOUS ACTION *T/A	(Col #1Plus #2,						
ORIGINAL BUDGET  1 \$0.00 2 3 4 5 6 7 8 TOTAL \$	AMOUNT TO BE TRANSFERRED 1,930.00	TO DATE  0.00	NO.	NAME	PREVIOUS ACTION *T/A	(Col #1Plus #2,						
ORIGINAL BUDGET  1 \$0.00 2 3 4 5 6 7 8 TOTAL \$	AMOUNT TO BE TRANSFERRED  1,930.00  1,930.00  DR TRANSFER	TO DATE  0.00	NO.	NAME	PREVIOUS ACTION *T/A	(Col #1Plus #2,						
ORIGINAL BUDGET  1 \$0.00 2 3 4 5 6 7 8 TOTAL \$	AMOUNT TO BE TRANSFERRED  1,930.00  1,930.00  DR TRANSFER	TO DATE  0.00	NO.	NAME	PREVIOUS ACTION *T/A	(Col #1Plus #2,						
ORIGINAL BUDGET  1 \$0.00 2 3 4 5 6 7 8 TOTAL \$	AMOUNT TO BE TRANSFERRED  1,930.00  1,930.00  DR TRANSFER	TO DATE  0.00	NO.	NAME	PREVIOUS ACTION *T/A	(Col #1Plus #2,						

# REQUEST FOR TRANSFER OF APPROPRIATED FUNDS BETWEEN MAJOR CLASSIFICATION

DATE	1/22/2018	DEPARTMENT		Health Department -	CHN	1159-340
				NAME		FUND/DEPT NO.
			TRANSF	ER FROM		
(1#)	(#2)				(#6)	
ORIGINAL	AMOUNT TO BE				PREVIOUS ACTION	REVISED BUDGET
BUDGET	TRANSFERRED	AMOUNT SPENT	ACCT.	ACCOUNT	*T/A	(Col #1 Less #2,
		TO DATE	NO.	NAME	& DATE	(+ or -) #6)
24,800	103.00	278.00	43130	Mileage		24,697.00
TOTAL \$	103.00					
			TRANSF	ER TO		
(1#)	(#2)				(#6)	
ORIGINAL	AMOUNT TO BE				PREVIOUS ACTION	REVISED BUDGET
BUDGET	TRANSFERRED	AMOUNT SPENT	ACCT.	ACCOUNT	*T/A	(Col #1Plus #2,
		TO DATE	NO.	NAME	& DATE	(+ or -) #6)
0	103.00	0.00	44540	Data Processing Software		\$103.00
TOTAL \$	103.00					
REASON FO	R TRANSFER	Purchase of Nua	ance Pow	er PDF software		
	E.					

#### REQUEST FOR TRANSFER OF APPROPRIATED

MAJOR CLASSIFICATION **FUNDS** BETWEEN

DATE 1/10/2018 DEPARTMENT MCH Program Income 8127-614 NAME FUND/DEPT NO.

#### TRANSFER FROM

(1#)	(#2)				(#6)	
ORIGINAL	AMOUNT TO BE				PREVIOUS ACTION	REVISED BUDGET
BUDGET	TRANSFERRED	AMOUNT SPENT	ACCT.	ACCOUNT	*T/A	(Col #1 Less #2,
		TO DATE	NO.	NAME	& DATE	(+ or -) #6)
5,000	2,130.00	0.00	43830	Education & Tuition	\$0.00	2,870
TOTAL \$	\$2,130.00					

#### **TRANSFER TO**

(1#)	(#2)				(#6)	
ORIGINAL	AMOUNT TO BE				PREVIOUS ACTION	REVISED BUDGET
BUDGET	TRANSFERRED	AMOUNT SPENT	ACCT.	ACCOUNT	*T/A	(Col #1Plus #2,
		TO DATE	NO.	NAME	& DATE	(+ or -) #6)
3,000	2,130.00	\$5,129.00	44510	Other Equipment	\$0.00	5,130
TOTAL \$	\$2,130.00					

Transfer is to cover purchasing a new sterilizer for the dental clinic