	DATE:	08.20.18	DEPARTMENT	GENERAL			1000/105
				NAME			NUMBER
	AMOUNT	PROJ.	ACCOUNT/PROJECT	ACCT.	FUND	NAME	FUND
	REQUESTED	NO.	NAME	NO.			NO
1	7,830		OTHER EQUIPMENT	44510	GENERA	L	1000
2							
3							
4							
5							
6							
7							
8							
TOTAL	7,830						
	ODIOINIAL AMOUN	 	If Prior Add'l		T	ADDD	O) (ED
	ORIGINAL AMOUN		Appropriation		Transfers		
	Арргор.	as of	Was Approved	Be	Effected	BY	
		Date	This Year			COUNCIL	
			AMOUNT DATE	YES	NO	Amount	Date
_							
				-			
REASON	N FOR REQUEST:	Monies ne	eded to purchase a solid	door refrig	erator for s	torage of	
KLAGOI	TOR REGOEDT.		in our Crime Lab.	door reinig	CIGIOI IOI 3	torage or	
		31.231.00					
TO BE I	HEARD 09.08.18						

DATE: <u>8/22/18</u> DEPARTMENT Elkhart Superior Court No. 1 1000-162 **NAME** NUMBER ACCOUNT/PROJECT **AMOUNT** PROJ. ACCT. **FUND NAME FUND** NAME REQUESTED NO. NO NO. 15,000 **Petit Jurors** 41530 General 162 3 4 5 6 TOTAL 15,000 If Prior Add'l ORIGINAL AMOUNT Appropriation Can Transfers **APPROVED** Approp. Unspent as of Was Approved Be Effected BY Request Date This Year COUNCIL **AMOUNT** YES NO DATE Amount Date Funds are needed to bring the balance back to a positive. **REASON FOR REQUEST** 

**DEPARTMENT** DATE: 08-22-18 Highway 1112-980 **NAME** NUMBER ACCOUNT/PROJECT **AMOUNT** PROJ. ACCT. **FUND NAME FUND** NAME REQUESTED NO. NO. NO 428,926 Transfer to Rainy Day fund 45100 EDIT 1112 2 3 4 5 6 7 8 TOTAL 428,926 If Prior Add'l **ORIGINAL AMOUNT** Appropriation **APPROVED** Can Transfer Was Approved Be Effected BY Approp. Unspent as of This Year COUNCIL Request Date YES **AMOUNT** DATE NO **Amount** Date REASON FOR REQUES11. Transfer to rainy day fund. Corresponding app 09-2018 180041

DATE:	08.20.18	DEPART	MENT	JAIL CAGIT			1114/105
					NAME		NUMBER
AMOUNT REQUESTED	PROJ.			ACCT, NO.	FUND NAME		FUND NO
45,362		OTHER EQUIP	MENT	44510	JAIL CAGI	Г	1114
45,362							
ORIGINAL AMO Approp. Unspent Request	UNT as of Date	Appropr Was App This Y	iation proved /ear			B	Υ
							plex
	AMOUNT REQUESTED 45,362  45,362  ORIGINAL AMO Approp. Unspent Request	AMOUNT REQUESTED NO. 45,362  A5,362  ORIGINAL AMOUNT Approp. Unspent as of Request Date  N FOR REQUES Monies need	AMOUNT PROJ. ACCOUNT/REQUESTED NO. OTHER EQUIP  45,362 OTHER EQUIP  45,362 If Prior Approp. Unspent as of Request Date This Y  AMOUNT  AMOUNT  AMOUNT  AMOUNT  AMOUNT  AMOUNT  AMOUNT  AMOUNT	AMOUNT PROJ. NO. ACCOUNT/PROJECT NAME  45,362 OTHER EQUIPMENT  45,362  ORIGINAL AMOUNT Approp. Unspent as of Request Date  AMOUNT DATE  AMOUNT DATE	AMOUNT REQUESTED NO. ACCOUNT/PROJECT NO. 45,362 OTHER EQUIPMENT 44510  45,362 OTHER EQUIPMENT 44510  ABOUNT Appropriation Can Was Approved Be This Year  AMOUNT DATE YES  AMOUNT DATE YES  AN FOR REQUES Monies needed to purchase two floor scrubbers,	AMOUNT PROJ. ACCOUNT/PROJECT NO. NAME  45,362 OTHER EQUIPMENT 44510 JAIL CAGI  45,362 If Prior Add'I Appropriation Approp. Unspent as of Request Date AMOUNT DATE YES NO  AMOUNT DATE YES NO  N FOR REQUES Monies needed to purchase two floor scrubbers, one 48" range	AMOUNT PROJ. NO. ACCOUNT/PROJECT NO. NAME  45,362 OTHER EQUIPMENT 44510 JAIL CAGIT  B 45,362 If Prior Add'I Appropriation Was Approved This Year  AMOUNT DATE YES NO Amount  NFOR REQUES Monies needed to purchase two floor scrubbers, one 48" range with

	DATE: 8/22/18		DEPARTMEN'	T Highway	,		1135-212 A	
					NAME		NUMBER	
	AMOUNT REQUESTED	PROJ.	ACCOUNT/PROJ NAME	ECT ACCT,	FUND	NAME	FUND NO	
1	5,000		Professional	41120	Cumulativ	e Bridge	1135	
2								
3								
4								
5								
6					-			
7								
TOTAL	5,000							
TOTAL	5,000							
			If Prior Add'l					
	ORIGINAL AMOU	I NT	Appropriation	Can	Transfers	APPROVED		
	Approp. Unspent		Was Approve		Effected	BY		
	Request	Date	This Year				COUNCIL	
			AMOUNT DATE	YES	NO	Amount	Date	
			7215.1	_	1			
REASO	N FOR REQUEST	1. funds	to meet payroll for	remainder of 2	018			

DATE: August 21, 2018 DEPARTMENT

Commissioners

1138/980

NAME

	AMOUNT REQUESTED	PROJ. NO.	ACCOUNT/PROJECT NAME	ACCT. NO.	FUND NAME		FUND NO
1	150,000.00	182006	Other Equipment	44510	Cumulative C	ap Development	1138
2							
3							
4							
5							
6							
7							
8							
TOTAL	150,000.00						
	ORIGINAL AMO Approp. Unspent Request	DUNT as of Date	If Prior Add'I Appropriation Was Approved This Year	Can Be	Transfers Effected	APPROV BY COUNC	
			AMOUNT DATE	YES	NO	Amount	Date

REASON FOR REQUEST	As this request is being submitted the uncommitted balance in the account for capital
items is approximately \$4,000	. This account is the one that is used to buy capital items for various county departments.
Currently I am working with the	e Parks Department to finalize some equipment purchases. In addition, funds are
needed for any office equipme	ent that fails before the end of the year.
To be heard September 8, 20	18

DATE: 8/14/18	DEPARTMENT	Surveyor	1141 (980)
		NAME	NUMBER

	AMOUNT	PROJ.		ACCT. FUND NAME		FUND	
	REQUESTED	NO.	ACCOUNT/PROJ	NO.			NO
1	3,000	181022	York Twp Ditch	44600	Cum Drain		1141
2	4,000	181023	Pine Creek	44600	Cum Drain		1141
3	20,000	181024	Baugo Creek	44600	Cum Drain		1141
4							
5							
6							
7							
8							
TOTA	27,000						
	ORIGINAL AMOUNT Approp. Unspent as of		If Prior Add'l Appropriation Was Approved This Year	Can Be	Transfers Effected		
	Request	Date	AMOUNT	YES	NO	Amount	Date
			711100111	120	110	Tunount	Date

REASON FOR REQUEST	Maintenance on County Regulated Drains					

DATE: 8/21/18	DEPARTMENT	Surveyor	1141-980 <i>A</i>
		NAME	NUMBER

	AMOUNT	PROJ.		ACCT.	FUND	NAME	FUND	
	REQUESTED	NO.	ACCOUNT/PROJEC	NO.			NO	
1	75,000	181025	Kieffer	44600	Cumulati	ve Drainage	1141	
2	10,000	181026	Kitson	44600	Cumulati	ve Drainage	1141	
3	30,000	181027	Wagner	44600	Cumulati	ve Drainage	1141	
4	30,000	181028	Horn	44600	Cumulati	ve Drainage	1141	
5	15,000	181029	Damey Tile	44600	Cumulati	ve Drainage	1141	
6	10,000	181030	Washington Twp.	44600	Cumulati	ve Drainage	1141	
7	20,000	181031	Rock Run Creek	44600	Cumulati	ve Drainage	1141	
8	4,000	181032	Cobus Creek	44600	Cumulati	ve Drainage	1141	
9	10,000			44600	Cumulati	ve Drainage	1141	
10	13,000		McNutt	44600	Cumulative Drainage		1141	
11	10,000	181035	Osborne Manning	44600	Cumulative Drainage		1141	
TOTAL	227,000							
			If Prior Add'l			40000		
	ORIGINAL AMOUN		Appropriation		Can Transfers		APPROVED	
	Approp. Unspent	as of	Was Approved	Be Effected		BY		
	Request	Date	This Year			COUNCIL		
			AMOUNT DATE	YES	NO	Amount	Date	

REASON FOR REQUEST	Maintenance on County Regulated Drains					

DATE: 08-22-18

DEPARTMENT

Highway

1149-980

NAME

		PROJ. NO.	ACCOUNT/PRO	DJECT NAME	ACCT. NO.	FUND NAME		FUND NO
1	50,000		Fiber Connection	n to Bristol		Economic D	evelopment Fee	1149
2								
3								
4								
5								
6								
7								
8								
TOTAL	50,000							
	ORIGINAL AM Approp.	OUNT as of Date	If Prior Approp Was Ap This	riation proved	Can Be	Transfers Effected	APPROVED BY COUNCIL	
			AMOUNT	DATE	YES	NO	Amount	Date

<b>REASON FOR REQUE</b> 1. Funds to install fiber to Bristol	
350,000 total	
200,000 RDC	
100,000 EDIT	
50,000 Econ Dev Fee	

	DATE:	08.20.18	DEPARTMENT	E	XTRADITIO	N	1155/980	
					NAME		NUMBER	
	AMOUNT	PROJ.	ACCOUNT/PROJECT	ACCT.	FUND	NAME	FUND	
	REQUESTED	NO.	NAME	NO.			NO	
1	642		PRISONER TRANSPORT	43820	EXTRADIT	ION	1155	
2								
3		-						
4								
5								
6								
7								
8								
TOTAL	642							
			If Prior Add'I					
	ORIGINAL AMOUNT		Appropriation	Can Transfers		APPROVED		
	Approp. Unspent	as of	Was Approved	Be Effected		BY	BY	
	Request	Date	This Year			COUN	COUNCIL	
			AMOUNT DATE	YES	NO	Amount	Date	
REASON FOR REQUEST  To fund the appropriate account regarding transport of prisoners.								
TO BE H	IEAR 09.08.18							

DEPARTMENT 1176-201A DATE: 08/22/18 Highway **NUMBER** NAME AMOUNT PROJ. ACCT. FUND NAME **FUND** ACCOUNT/PROJECT REQUESTED NO. NAME NO. NO

			,					
1	20,000		Excess Hour	s	41165	Motor Vehicl	e Highway	1176
2								
3								
4								
5								
6								
7								
8								
TOTAL	20,000							
	ORIGINAL AMOUNT  Approp. Unspent as of Request Date		If Prior Add'I Appropriation Was Approved This Year		Can Transfers Be Effected		APPROVED BY COUNCIL	
			AMOUNT	DATE	YES	NO	Amount	Date

REASON FOR REQUEST	1. Funds to meet project additional hours required for work load.					

NAME

	AMOUNT	PROJ.	ACCOUNT/PROJEC	ACCT.	FUND	NAME	FUND NO
	REQUESTED	NO.	T NAME	NO.			
1	10,000		Supervisor & Other	41115	Motor Vehic	cle Highway	1176
2	200,000		Excess Hours	41165	Motor Vehic	cle Highway	1176
3	30,000		PT Service Maint	41230	Motor Vehic	cle Highway	1176
4							
5							
6							
7							
8							
TOTAL	240,000						
	ORIGINAL AMOUN Approp. Unspent Request	as of Date	If Prior Add'l Appropriation Was Approved This Year		Transfers Effected	APPR B' COU	Y NCIL
			AMOUNT DATE	YES	NO	Amount	Date

REASON FOR REQUEST	1. Funds needed to meeet payroll needs
2. Funds to meet payroll.	
3. Funds to meet payroll	

Highway

1176-980

DEPARTMENT

DATE: 08-22-18

NAME **NUMBER** ACCOUNT/PROJECT **AMOUNT** ACCT. **FUND NAME FUND** PROJ. NAME REQUESTED NO. NO. NO 5,000 180040 Road Paving & Maintenance 44600 Motor Vehicle Highway 1176 1 2 3 4 5 6 7 8 TOTAL 5,000 If Prior Add'l **ORIGINAL AMOUNT** Can Transfers **APPROVED** Appropriation Be Effected Was Approved BY Approp. Unspent as of COUNCIL This Year Request Date **AMOUNT** DATE YES NO **Amount** Date REASON FOR REQUEST 1. Funds provided by NIPSCO for damage to county roads from cross country powerline installation. Funds to be used to repair damaged areas.

DATE: 08-22-18

DEPARTMENT

Highway

1229-981

NAME

	AMOUNT REQUESTED	PROJ.	ACCOUNT/ NAI		ACCT.	FUND	NAME	FUND NO
1	428,926		Road paving a			LOIT Special I	Distribution	1229
2		100011	rtodd pavilig t	ing mant	44000	сотт орсонат	Distribution	1223
3								
4								
5								
6								
7								
8	14							
TOTAL	428,926							
	ORIGINAL AMOUNT Approp. Unspent as of Request Date		If Prior Add'I Appropriation Was Approved This Year		Can Transfers APPRO Be Effected BY			
			AMOUNT	DATE	YES	NO	Amount	Date

Day Fund. This closes out the Special Distribution Fund.

DATE: 08-22-18 DEPARTMENT

Highway

1229-981

NAME

	AMOUNT	PROJ.	ACCOUNT	/PROJECT	ACCT.	FUND I	NAME	FUND	
	REQUESTED	NO.		NAME				NO	
1	1,117,502	180042	Paving and roa	d maintenance	44600	LOIT Special I	Distribution	1229	
2									
3									
4									
5									
6									
7									
8									
TOTAL	1,117,502								
	*		If Prior	r Add'l					
	ORIGINAL AMOU	INT	Appropriation		Can Transfers APPR		APPRO	ROVED	
	Approp.Unspent	as of	Was A	oproved	Ве	Be Effected BY		3Y	
	Request	Date	This	Year			COU	COUNCIL	
			AMOUNT	DATE	YES	NO	Amount	Date	

REASON FOR REQUEST 1. Funds for paving and road maintenance (chip seal).	
Will be used for all costs associated	
with construction.	
This amount will be deducted from the EDIT portion of the LOIT distribution.	
This closes out the special distribution fund.	

8/21/2018 DEPARTMENT <u>CR 6&17 NE TIF</u> 4511-980
NAME NUMBER

AMOUNT	PROJ.	ACCOUN	T/PROJECT	ACCT.	FUND	NAME	FUND	
REQUESTED	NO.	NAME		NO.			NO	
1 \$ 200,000	182509	Construction & Reconstruct.		44600	CR 68	317 NE TIF	4511	
2 \$ 10,000	172509	Construction	& Reconstruct.	44600	CR 68	&17 NE TIF	4511	
3								
4								
5								
6								
7								
8								
TOTAL \$ 210,00	00							
		If Pri	or Add'l					
ORIGINAL AMOU	NT	Appropriation		Can	Can Transfers APPRO			
Approp. Unspent	as of	Was Approved Be E		Effected				
Request	Date	This Year		COU			NCIL	
		AMOUNT	DATE	YES	NO	Amount	Date	
1								
2								
3								
4								
5								
6								
7								
8								
TOTAL \$								

REASON FOR REQUEST	Fiber optic intrastructure from CR 17 to Bristol					
	Reimbursement to Highway for construction inspection for Love's Drive					

 1/22/2018
 DEPARTMENT
 Redevelopment
 4911-980

 NAME
 NUMBER

AMOUNT PROJ. REQUESTED NO.		ACCOUNT/PROJECT NAME	ACCT.			FUND NO
1 \$ 750.00		Sustenance	43110	Redeve	lopment	4911
2 \$ 425.00		Education and Conference	43830		lopment	4911
3 \$ 250.00		Mileage	43130	Redeve	lopment	4911
4 \$ 300.00		Food	42310	Redeve	lopment	4911
5 \$ 250.00		Data Processing Software	44540	Redeve	lopment	4911
6						
7						
8						
TOTAL \$1,975.00						
ORIGINAL AMOUNT  Approp. Unspent as of Request Date		If Prior Add'l 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						
TOTAL \$						

REASON FOR REQUEST	Expenses for hotel, meals and travel costs
	Conferences and Training
	mileage paid for travel to conferences
	meal catered in December for RDC members
	adobe publisher

DATE: <u>8/15/18</u>

**DEPARTMENT: WIC** 

8101-612

NAME

	AMOUNT REQUESTED	PROJ. NO.	ACCOUNT/PROJECT NAME	ACCT. NO.	FUND	NAME	FUND NO
1	166,227		Supervisor	41115			8101
2	364,545		Professional	41120			
3	122,915		Paraprofessional	41135			
4	23,069		PT Professional	41200			
5	1,000		Excess Hours	41165			
6	42,021		Social Security	41300			
7	73,324		PERF	41400			
8	249,303		Group Insurance	41310			
9	22,875		Wellness	41330			
10	9,828		Medicare	41305			
11							
TOTAL	1,075,107						
	ORIGINAL AMO	UNT	If Prior Add'I Appropriation	Can	Transfers	APPR	OVED
	Approp Unspent	as of	Was Approved Be		Effected	В	
	Request	Date	This Year			COU	NCIL
			AMOUNT DATE	YES	NO	Amount	Date

REASON FOR REQUEST	Grant Total \$1,163,660. Set the budget for FY 2019				
for the WIC grant.	Grant year October 1, 2018 through September 30, 2019.				

DATE: <u>8/15/18</u>

DEPARTMENT: Women, Infant & Child Grant

8101-612

NAME

AMOU	INIT	PROJ.			ACOT	FUNDA	10045	FUND	
		- 1			ACCT.	FUND NAME		FUND	
REQUE		NO.	ACCOUNT/PRO.		NO.			NO	
	750		Copy Machine		42030	WIC Grant		8101	
	250		Other Office Supplies 42090 WIC Grant		8101				
	15,000		Medical Su	pplies	42180	WIC	Grant	8101	
	15,600		Other Operatin	g Supplies	42195	WIC	Grant	8101	
	5,000		Other Professi	onal Svcs	43090	WIC	Grant	8101	
	7,000		Sustana	nce	43110	WIC	Grant	8101	
	1,750		Postaç	je	43120	WIC	Grant	8101	
	3,500		Mileag	е	43130	WIC	Grant	8101	
	2,820		Telepho	ne	43140	WIC	Grant	8101	
	5,983		Printin	g	43200	WIC	Grant	8101	
	8,000		Electr	c	43400	WIC Grant		8101	
	2,750		Gas		43410	WIC Grant		8101	
	1,750		Water & S	ewage	43420	WIC Grant		8101	
	1,000		Maintena	ince	43510	WIC Grant		8101	
	10,000		Laundry, Cl	eaning	43570	WIC	Grant	8101	
	5,400		Rent-Real	Estate	43600	WIC	Grant	8101	
	1,000		Rent-Office E	quipment	43630	WIC	Grant	8101	
	1,000		Education & Conf	erence Costs	43830	WIC	Grant	8101	
	88,553							Date	
			If Prior A	\dd'l					
ORIGINAL	AMOUNT		Appropri	ation	Can	Transfers	APPR	APPROVED	
Approp.	Unspent	as of	Was App	roved	Ве	Be Effected		Υ	
	Request	Date			NCIL				
			AMOUNT	DATE	YES	NO	Amount	Date	

REASON FOR REQUEST:	Set the budget for FY 2019 for the WIC grant	
	Grant Total \$1,163,660	

DATE:

8/15/18

DEPARTMENT: Health- Breastfeeding Peer Counselor 8102-981

NAME

AMOUNT	PROJ.	ACCOUNT/PROJECT	ACCT.	FUND	NAME	FUND
REQUESTED	NO.	NAME	NO.			NO
73,438		Paraprofessional	41135			8102
4,553		Social Security	41300			
8,225		PERF	41400			
24,252		Group Insurance	41310			
1,875		Wellness	41330			
1,065		Medicare	41305			
528		Mileage	43130			
200		Sustenance	43110			
420		Telephone	43140			
114,556						
		If Prior Add'l			45550	]
ORIGINAL AMO	OUNI	Appropriation	Can	Transfers	APPROV	ED
Approp. Unspent	as of	Was Approved	Be Effected		BY	
Request	Date	This Year			COUNCIL	
		AMOUNT DATE	YES	NO	Amount	Date

REASON FOR REQUEST:	Set the budget for FY 2019 for the Breastfeeding Peer				
Counselor grant	Grant Year October 1, 2018 through September 30, 2019.				

DATE: August 3 2018

DEPARTMENT: Health Public Heath Preparedness

8119-980

NAME

AMOUNT	PROJ.	ACCOUNT/PRO	OJECT	ACCT. NO.	FUND	NAME	FUND
REQUESTED	NO.						NO
1,000		Operating Supplies		42195			8119
1,000	ļ	Capital Supplies		42380			
2,000							
		If Prior Ad					
ORIGINAL AMOUN		Appropriati		Can	Transfers	APPROVE	D
Approp Unspent	as of	Was Appro		Ве	Effected	BY	
Request	Date	This Yea	ar			COUNCIL	
		AMOUNT DA	ATE	YES	NO	Amount	Date

REASON FOR REQUES 1:	PHEPCA IUIIUS					

DATE: 8/16/18 DEPARTMENT: Fetal and Infant Mortality Review 8127-611

NAME NUMBER

AMOUNT	PROJ.		ACCT.	FUND	NAME	FUND
REQUESTED	NO.	ACCOUNT/PROJECT NAM	NO.	I OND	INVINIT	NO
	NO.					
15,500		Professional	41200			8127
961		Social Security	41300			
225		Medicare	41305			
1,245		Other Office Supplies	42090			
1,125		Other Operating Supplies	42195			
295		Mileage	43130			
19,351						
10,001						
		If Prior Add'l				
			Can	Transfers	APPR	OVED
ORIGINAL AMOUNT		Appropriation				
Approp. Unspent	as of	Was Approved	Be Effected		BY	
Request	Date	This Year			COU	NCIL
		AMOUNT DATE	YES	NO	Amount	Date

REASON FOR REQUEST:	Set the budget for FY 2019 for the Fetal and Infant Mortality Review  Grant year October 1, 2018 through September 30, 2019			

DEPARTMENT DATE: 8/16/18 Baby and Me Tobacco Free 8127-615 **NAME NUMBER** ACCOUNT/PROJECT NAME ACCT. **AMOUNT** PROJ. **FUND NAME FUND** NO **REQUESTED** NO. NO. 22,354 Professional 41120 8127 1,386 41300 **Social Security** 2,504 PERF 41400 375 Wellness 41330 324 41305 Medicare 500 Other Office Supplies 42090 19,107 Other Operating Supplies 42195 200 Sustenance 43110 43130 1,000 Mileage 250 Postage 43120 Other Professional Svcs 43090 2,000 50,000 If Prior Add'l **ORIGINAL AMOUNT** Appropriation Can **Transfers APPROVED** Was Approved Be Effected BY Approp. Unspent as of COUNCIL Request Date This Year **AMOUNT** DATE YES NO **Amount** Date

REASON FOR REQUEST	F: Set the budget for FY 2019 for the Baby and Me Tobacco Free Grant					
Grant year October 1, 2018 through September 30, 2019						
·						

DATE: <u>8/16/2018</u>

DEPARTMENT: Healthy Beginnings-Hospital Prenatal Car 9122-981

NAME

AMOUNT		PROJ.			ACCT, NO.	FUND N	IAME	FUND	
REQUEST	ED	NO.	ACCOUNT/PI	ACCOUNT/PROJECT NAME				NO	
	23,766		Professional		41120			9122	
	12,172		PT Office and	Clerical	41220				
	2,228		Social Securit	у	41300				
	521		Medicare Con	tribution	41305				
	375		Wellness		41330				
	2,662		PERF		41400				
	100		Excess Hours		41165				
	3,780		Other Profess	ional Svcs	43090				
	45,604								
			If Pric	or Add'l					
ORIGINA	AL AMOUNT		Appro	priation	Can	Transfers	APPR	OVED	
Approp.	Unspent	as of	Was A	pproved	Ве	Effected	B	BY	
	Request	Date		Year			COU	COUNCIL	
			AMOUNT	DATE	YES	NO	Amount	Date	

REASON FOR REQUES I	Grant year October 1, 2018 thru September 30, 2019					
Set Budget for Healthy Babies services for 2019						

DATE: 08.21.11 DEPARTMENT JAIL TREATMENT GRANT (FY19)

9125/980

NAME

	AMOUNT	PROJ.		ACCT.	FUND	NAME	FUND
	REQUESTED	NO.	ACCOUNT/PROJEC		10110	INVIAIT	NO
1	35,000		SUPER & OTHER ADM		EV10 IAII TD	EATMENT 1006 GRANT	9125.980
2	49,982		PROTECTIVE SERVICE			EATMENT 1006 GRANT	9125,980
3	5,269		SOCIAL SECURITY			EATMENT 1006 GRANT	9125.980
4	1,232		MEDICARE			EATMENT 1006 GRANT	9125.980
5	21,599		GROUP INSURANCE			EATMENT 1006 GRANT	9125.980
6	21,399					EATMENT 1006 GRANT	9125.980
			PERF				
7	1,828		WORKERS COMP			EATMENT 1006 GRANT	9125.980
8	82,058		MEDICAL			EATMENT 1006 GRANT	9125.980
9	2,000		SOFTWARE	44540	44540 FY19 JAIL TREATMENT 1006 GRANT		9125.980
TOTAL	223,240						
	ORIGINAL AMO	UNT as of	If Prior Add'I Appropriation Was Approved	Can Be	Transfers Effected	APPROVE BY	D
	Request	Date	This Year			COUNCIL	
			AMOUNT DATE	YES	NO	Amount	Date

REASON FOR REQUEST	To fund accounts for FY19 JAIL TREATMENT 1006 grant.	
TO BE HEARD 09.08.18		

DATE:	8/16/18	DEPARTMENT:	Baby Box G	Grant		9140-980
				NAME		NUMBER
AMOUNT	PROJ.		ACCT.	FUND	NAME	FUND
REQUESTED	NO.	ACCOUNT/PROJECT NAME	NO.			NO
12,000		Other Operating Supplies	42195			9140
12,000						
ORIGINAL AMOU	as of	If Prior Add'I Appropriation Was Approved	Can Be	Transfers Effected	APPRO BY	<b>'</b>
Request	Date	This Year			COUN	
		AMOUNT DATE	YES	NO	Amount	Date
REASON FOR REQUEST:  Additional funds for Baby Box Grant						
	**					

### ELKHART COUNTY APPROPRIATION REDUCTION REQUEST

PAGE 1

DATE: 8/22/2018 DEPARTMENT Surveyor 1141-980 NUMBER NAME PROJ. **AMOUNT** ACCT. **FUND NAME FUND** REQUESTED NO. ACCOUNT/PROJECT NAME NO. NO 44600 1 5,885.00 132329 Manhole Maint. **Cumulative Drainage** 1141 \$ 2 \$ 3,251.10 151001 Fisher Gordon 44600 **Cumulative Drainage** 1141 3 1141 \$ 151002 Sailor 44600 812.50 **Cumulative Drainage** 4 \$ 1,396.57 151003 Emergency 2014 44600 **Cumulative Drainage** 1141 5 44600 1141 \$ 151004 Storm Debris **Cumulative Drainage** 1,360.00 6 44600 1141 \$ 25,571.30 151014 Anan Ulery Tile **Cumulative Drainage** 7 44600 1141 \$ 19,110.40 151015 Whetten drain **Cumulative Drainage** 44600 1141 8 \$ 151017 Lat N Horn-Collins **Cumulative Drainage** 9,355.50 44600 1141 9 \$ 151018 Kieffer Ditch 2,928.00 **Cumulative Drainage** 44600 1141 10 \$ 2,455.00 151021 Lat N Horn-Collins Cumulative Drainage 44600 1141 11 \$ 375.00 161001 Hinderer **Cumulative Drainage** 1141 161002 Mow/Grush/Grind/Spray 44600 12 \$ 2.039.00 **Cumulative Drainage** 44600 1141 13 \$ 1,683.47 161009 Tile Investigation & Repairs **Cumulative Drainage** 1141 14 \$ 764.00 161011 Lat M Horn Kauffman 44600 **Cumulative Drainage** 1141 15 \$ 161014 Coe Meyer 44600 1,670.00 **Cumulative Drainage** 44600 1141 161015 Bullard **Cumulative Drainage** 16 \$ 354.83 17 1,500.00 161017 Gast Thornton 44600 **Cumulative Drainage** 1141 \$ TOTAL \$ 80,511.67 If Prior Add'l **APPROVED** ORIGINAL AMOUNT Appropriation Can **Transfers** Be Effected BY Was Approved as of Approp. COUNCIL This Year Date **AMOUNT** DATE YES NO **Amount** Date 1 \$ 20,000.00 Nov-13 2 \$ Jan-15 10,000.00 3 \$ 6,000.00 Jan-15 4 \$ 10,000.00 Jan-15 5 \$ 10,000.00 Jan-15 6 \$ 130,000.00 Jul-15 7 \$ 75,000.00 Jul-15 8 Aug-15 15,000.00 \$ 9 \$ 10,000.00 Aug-15 10 \$ 9,000.00 Nov-15 11 \$ 5,000.00 Jan-16 12 s 5,000.00 Feb-16 13 \$ 10,000.00 May-16 14 \$ 2,500.00 Jul-16 15 \$ 5,000.00 Jul-16 16 \$ 15.000.00 Sep-16 17 \$ 2,500.00 Oct-16

**Reason for Request** 

return of unused cum drain funds

TOTAL REQUEST \$154,644.72

### ELKHART COUNTY APPROPRIATION REDUCTION REQUEST

PAGE 2

DATE: 8/22/2018 DEPARTMENT Surveyor 1141-980

NAME NUMBER

150							
	AMOUNT	PROJ.		ACCT.	FUND NA	ME	FUND
	REQUESTED	NO.	ACCOUNT/PROJECT NAME	ACCOUNT/PROJECT NAME NO.		NO	
18	\$ 2,529.60	171001	Grimes	44600	Cumulative	Drainage	1141
19	\$ 2,606.00	171003	Kehr	44600	Cumulative	Drainage	1141
20	\$ 687.50	171008	Ben Blue	44600	Cumulative	Drainage	1141
21	\$ 1,200.10	171009	Lehman Farmwalt	44600	Cumulative	Drainage	1141
22	\$ 32,318.19	171012	Hahn Tile	44600	Cumulative	Drainage	1141
23	\$ 14,420.00	171013	Christophel Davidhizer Doering	44600	Cumulative	Drainage	1141
24	\$ 2,150.00	171014	Jacob Myers	44600	Cumulative	Drainage	1141
25	\$ 1,823.04	171015	Juday	44600	Cumulative	Drainage	1141
26	\$ 2,671.00	181001	Camera Inspections	44600	Cumulative	Drainage	1141
27		181003	Kosciusko Co. Assessments	44600	Cumulative	Drainage	1141
28		181004	Damey Tile	44600	Cumulative	Drainage	1141
29			Josiah Neff Tile	44600	Cumulative	Drainage	1141
30		181009	Fetters Pletcher	44600	Cumulative	Drainage	1141
31		181010	Damey Tile	44600			1141
32			Werntz	44600			1141
33			Barkey	44600	Cumulative Drainage		1141
34			Mather	44600			1141
	\$ 74,133.05						
TOTAL	\$ 74,133.05		If Prior Add'l				-
-	ORIGINAL AMOU	NT	Appropriation	Can	Transfers	APPRO'	VED
	Approp.	as of	Was Approved	Be Effected		BY	
		Date	This Year			COUN	
			AMOUNT DATE	YES	NO	Amount	Date
18	\$ 8,000.00						
19		Jan-17					
	\$ 20,000.00	Jan-17					
20	\$ 20,000.00 \$ 3,000.00	Jan-17 Apr-17					
	\$ 20,000.00 \$ 3,000.00 \$ 4,000.00	Jan-17					
20 21	\$ 20,000.00 \$ 3,000.00 \$ 4,000.00 \$ 100,000.00	Jan-17 Apr-17 Apr-17					
20 21 22 23 24	\$ 20,000.00 \$ 3,000.00 \$ 4,000.00 \$ 100,000.00 \$ 40,000.00 \$ 2,500.00	Jan-17 Apr-17 Apr-17 Aug-17 Oct-17					
20 21 22 23 24 25	\$ 20,000.00 \$ 3,000.00 \$ 4,000.00 \$ 100,000.00 \$ 40,000.00 \$ 2,500.00 \$ 5,000.00	Jan-17 Apr-17 Apr-17 Aug-17 Oct-17 Oct-17					
20 21 22 23 24 25 26	\$ 20,000.00 \$ 3,000.00 \$ 4,000.00 \$ 100,000.00 \$ 40,000.00 \$ 2,500.00 \$ 5,000.00	Jan-17 Apr-17 Apr-17 Aug-17 Oct-17 Oct-17 Oct-17 Jan-18					
20 21 22 23 24 25 26 27	\$ 20,000.00 \$ 3,000.00 \$ 4,000.00 \$ 100,000.00 \$ 2,500.00 \$ 5,000.00 \$ 690.00	Jan-17 Apr-17 Apr-17 Aug-17 Oct-17 Oct-17 Oct-17 Jan-18 Mar-18					
20 21 22 23 24 25 26 27 28	\$ 20,000.00 \$ 3,000.00 \$ 4,000.00 \$ 100,000.00 \$ 2,500.00 \$ 5,000.00 \$ 690.00 \$ 3,000.00	Jan-17 Apr-17 Apr-17 Aug-17 Oct-17 Oct-17 Oct-17 Jan-18 Apr-18					
20 21 22 23 24 25 26 27 28 29	\$ 20,000.00 \$ 3,000.00 \$ 4,000.00 \$ 100,000.00 \$ 2,500.00 \$ 5,000.00 \$ 690.00 \$ 3,000.00 \$ 2,300.00 \$ 3,200.00	Jan-17 Apr-17 Apr-17 Aug-17 Oct-17 Oct-17 Oct-17 Jan-18 Mar-18					
20 21 22 23 24 25 26 27 28 29 30	\$ 20,000.00 \$ 3,000.00 \$ 4,000.00 \$ 100,000.00 \$ 2,500.00 \$ 5,000.00 \$ 5,000.00 \$ 690.00 \$ 3,000.00 \$ 2,300.00 \$ 2,300.00	Jan-17 Apr-17 Apr-17 Aug-17 Oct-17 Oct-17 Oct-17 Jan-18 Apr-18 Jun-18 Jun-18 Jun-18					
20 21 22 23 24 25 26 27 28 29 30 31	\$ 20,000.00 \$ 3,000.00 \$ 4,000.00 \$ 100,000.00 \$ 40,000.00 \$ 2,500.00 \$ 5,000.00 \$ 5,000.00 \$ 690.00 \$ 3,000.00 \$ 2,300.00 \$ 2,300.00 \$ 2,300.00 \$ 5,000.00	Jan-17 Apr-17 Apr-17 Aug-17 Oct-17 Oct-17 Oct-17 Jan-18 Apr-18 Jun-18 Jun-18 Jun-18					
20 21 22 23 24 25 26 27 28 29 30	\$ 20,000.00 \$ 3,000.00 \$ 4,000.00 \$ 100,000.00 \$ 40,000.00 \$ 2,500.00 \$ 5,000.00 \$ 5,000.00 \$ 690.00 \$ 3,000.00 \$ 2,300.00 \$ 2,300.00 \$ 2,300.00 \$ 2,300.00 \$ 2,300.00	Jan-17 Apr-17 Apr-17 Aug-17 Oct-17 Oct-17 Oct-17 Jan-18 Apr-18 Jun-18 Jun-18 Jun-18					

Reason for Request

return of unused cum drain funds

TOTAL REQUEST \$154,644.72

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

DATE 8-10-18

**DEPARTMENT Solid Waste** 

1194/338

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	(+ ог -) #6)
1 5,000	5,000	\$0.00	44200	Buildings	N/A	\$0
2 30,000	25,000	\$0.00	44300	Land Improvements	N/A	\$5,000
3 10,000	5,000	\$0.00	44310	Impts othe than build	N/A	\$5,000
4 820,000	20,000.00	\$2,657.09	44400	Machine & Equip	N/A	\$800,000.00
5						
6						
7						
8						
TOTAL \$	55,000.00				***	

### **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)
1 60,000	40,000.00	6,182.00	43090	Other Prof. Serv.	N/A	\$100,000.00
2 5,000	15,000.00	7,601.36	43500	Building Repairs	N/A	\$20,000.00
3						
4						
5						
6						
7						
8						

55,000.00 TOTAL \$

REASON FOR TRANSFER	Old buildings that need repairs. Other Prof. Services cost for enFoces.
-	
	45

# REQUEST FOR TRANSFER OF APPROPRIATED FUNDS BETWEEN MAJOR CLASSIFICATION

DATE	8/6/2018	DEPARTMENT		WIC		8101-312
DATE	0/0/2010			NAME		FUND/DEPT NO.
		TRANSFER FRO	M			
(1#)	(#2)				(#6)	
ORIGINAL	AMOUNT TO BE	AMOUNT SPENT TO DATE	ACCT.NO.	ACCOUNT	PREVIOUS ACTION	REVISED BUDGET
BUDGET	TRANSFERRED	TODATE		NAME	*T/A	(Col #1 Less #2,
					& DATE	(+ or -) #6)
4,000	750.00	603.42	43090	Other Professional	(\$2,096.00)	1,154
						-
(1#)	(#2)		TRANSFE	R TO	(#6)	
ORIGINAL	AMOUNT TO BE	AMOUNT SPENT	ACCT. NO	ACCOUNT	PREVIOUS ACTION	REVISED BUDGET
BUDGET	TRANSFERRED	TO DATE		NAME	*T/A	(Col #1Plus #2,
					& DATE	(+ or -) #6)
8,000	750.00	\$10,589.80	42180	Medical Supplie	\$2,000.00	10,750
TOTAL	\$750.00					
TOTAL	Ψ730.00					
REASON F	FOR REQUEST:					
	Transfer to cove	r needed medical	supplies fo	or the clinic		

# REQUEST FOR TRANSFER OF APPROPRIATED FUNDS BETWEEN MAJOR CLASSIFICATION

DATE	8/15/2018	DEPARTMENT	WIC	8101-312 /	
			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	(+ ог -) #6)
10,000	1,805.00	6,974.03	43570	Cleaning	(\$167.00)	8,028
						#
TOTAL \$	\$1,805.00					

### **TRANSFER TO**

(1#)	(#2)				(#6)	
ORIGINAL	AMOUNT TO BE	AMOUNT SPENT		ACCOUNT NAME	PREVIOUS ACTION	REVISED BUDGET
BUDGET	TRANSFERRED	TO DATE	0		*T/A	(Col #1Plus #2,
					& DATE	(+ or -) #6)
0	1,805.00	\$0.00	44310	Improvements other	\$0.00	1,805
				than building		
						:
TOTAL \$	\$1,805.00				,	

REASON FOR REQUEST:	
Transfer is to cover cement work done in the back of the building.	

### **REQUEST FOR TRANSFER OF APPROPRIATED**

FUNDS BETWEEN **MAJOR CLASSIFICATION** 

DATE

8/15/2018

DEPARTMENT

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)
9,000	450.00	4,891.35	43570	Cleaning	\$0.00	8,650
TOTAL \$	\$450.00					

### **TRANSFER TO**

(1#)	(#2)				(#6)	
ORIGINAL	AMOUNT TO BE	AMOUNT SPENT	ACCT. NO	ACCOUNT NAME	PREVIOUS ACTION	REVISED BUDGET
BUDGET	TRANSFERRED	TO DATE			*T/A	(Col #1Plus #2,
					& DATE	(+ or -) #6)
0	450.00	\$0.00	44310	Improvements other	\$0.00	1,805
				than building		
TOTAL \$	\$450.00					* _

REASON FOR REQUEST:	
Transfer is to cover cement work done in the back of the building	

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

DATE <u>July 26, 2018</u>

**FUNDS** 

DEPARTMENT Equipment Sustainment/Maintenance

NAME

FUND/DEPT NO.

8154-981

### 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)		
14100	2,822.00	11278	44510					
3431	341.00	3090	42270					
TOTAL \$	3,163.00							

### **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)
2469	3,163.00	750.00	43550			
TOTAL \$	3,163.00					

### **REASON FOR TRANSFER**

Moving unspent grant funds to trailer repair line item. All grant funds will be spent.	
Need	
Director Tobey	

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

	DATE	8/10/2018	DEPARTMENT		ITPC	_	9104-980
					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)
1	1,839	87	1,508.60	43130	Mileage		1,752
2							
3							
<b>4 5</b>							
6							
7							2.4
8 9							
9							
	TOTAL \$	87.00					
				TRANSF	ER TO		
	(1#)	(#2)				(#6)	
		AMOUNT TO BE					REVISED BUDGET
	BUDGET	TRANSFERRED	AMOUNT SPENT TO DATE	ACCT. NO.	ACCOUNT NAME	*T/A & DATE	(Col #1Plus #2, (+ or -) #6)
1	0	87			Gasoline	d DATE	87
2		07	Ψ0.00	72110	Gasoniie		Or .
3							
4							
5							
6							
7 8						_	
	TOTAL A	07.00					
	TOTAL \$	87.00	J				
	REASON FO	OR TRANSFE	2	to pay ga	soline		
			-	to pay go			

DATE: 8-8-2018

DEPARTMENT

Elkhart County Solid Waste District

Signature of Department Head

				NAME		NUMBER
	PROJ.		ACCT.		FUN	
AMOUNT REQUESTED	NO.	ACCOUNT/PROJECT NAME	NO.	FUND NAME	NC	).
1 - \$60,000		Other Services & Charges	320	Solid Waste Mana	agement Fund	
2 - \$25,000		Enfocus	321	Solid Waste Mana	agement Fund	
3						
4						
5						
6						
7						
8						
TOTAL \$ 85,000						
ORIGINAL AMOUNT Approp. Unspent Request	as of Date	If Prior Add'I Appropriation Was Approved This Year	Can Be	Transfers Effected	APPRO BY COUN	
*		AMOUNT DATE	YES	NO	Amount	Date
1						
2						
3						
4						
5						
6						
7						
8						
TOTAL \$						
#1. Prize money for leaf colle			e for landfil	l and Solid Waste	District.	