



Legislation Text

File #: 21-4807, **Version:** 1

Department: Auditor

Department Head/Elected Official: Michael Post

Regular or Supplemental RCA:

- ☒ Regular RCA
☐ Supplemental RCA

Type of Request: Financial Authorization

Project ID (if applicable):NA

Vendor/Entity Legal Name (if applicable):NA

MWDBE Participation (if applicable):NA

Request Summary (Agenda Caption):

Request for approval of Supplemental Estimates of Revenue for FY 2021-22.

Background and Discussion: NA

Expected Impact: NA

Alternative Options: NA

Alignment with Goal(s):

- ☐ Justice and Safety
☐ Economic Opportunity
☐ Housing
☐ Public Health

☐ Transportation

- ☐ Flooding
☐ Environment

☒ Governance and Customer Service **Prior Court Action (if any):**

Location:

Address (if applicable list below):

- ☒ Countywide
☐ Precinct 1
☐ Precinct 2

☐ Precinct 3

<input type="checkbox"/> Precinct 4 Fiscal and Personnel Summary				
Service Name		FY 21-22	Estimates	
			FY 22	Next 3 FYs
Incremental Expenditures				
Labor Expenditures		-	-	-
Non-Labor Expenditures		-	-	-
Total Incremental Expenditures		-	-	-
Funding Sources (General Fund, PIC Fund, Debt or CP, Grants, or Other - Please Specify)				
Existing Budget		-	-	-
		-	-	-
		-	-	-
Total Current Budget		-	-	-
Additional Budget Requested		-	-	-
		-	-	-
		-	-	-
Total Additional Budget Requested		-	-	-
Total Funding Sources		-	-	-
Personnel (Fill out section only if requesting new PCNs)				
Current Position Count for Service		-	-	-
Additional Positions Requested		-	-	-
Total Personnel		-	-	-

Anticipated Implementation Date:

Emergency/Disaster Recovery Note:

☒ Not an emergency, disaster recovery, or COVID-19 related item

☐ Emergency Item

☐ COVID-19 related Item

☐ Disaster Recovery related Item

Contact(s) name, title, department:

Carmella Sanford, Executive Assistant/Executive Division, Auditor's Office

Attachments (if applicable):

List of Supplemental Estimates of Revenue