



Legislation Text

File #: 21-6390, **Version:** 1

Department: Auditor

Department Head/Elected Official:

Michael Post

Regular or Supplemental RCA: Regular 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 to close an Imprest Account for the Commissioner of Precinct 1.

Background and Discussion:

Expected Impact:

Alternative Options:

Alignment with Goal(s):

- ☐ Justice and Safety
- ☐ Economic Opportunity
- ☐ Housing
- ☐ Public Health
- ☐ Transportation
- ☐ Flooding
- ☐ Environment
- ☒ Governance and Customer Service

Prior Court Action (if any):

| Date | Agenda Item # | Action Taken |
|------|---------------|--------------|
| | | |

Location:

Address (if applicable):

Precinct(s): Countywide

| 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, or COVID-19 related item**Contact(s) name, title, department:** Carmella Sanford, Executive Assistant/Executive Division, Auditor's Office**Attachments (if applicable):** County Auditor's For 1235E