File #: 24-2446, **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): N/A
Vendor/Entity Legal Name (if applicable): N/A

MWDBE Contracted Goal (if applicable): N/A
MWDBE Current Participation (if applicable): N/A
Justification for 0% MWDBE Participation Goal: N/A - Goal not applicable to request

Request Summary (Agenda Caption):
Request for approval of Supplemental Estimates of Revenue for Fiscal Year 2024.

Background and Discussion:

Expected Impact:

Alternative Options:

Alignment with Goal(s):

 _ Justice and Safety
 _ Economic Opportunity
 _ Housing
 _ Public Health
 _ Transportation
 _ Flooding
 _ Environment
 _X Governance and Customer Service

Prior Court Action (if any)**:**

Date	Agenda Item #	Action Taken

Location:
Address (if applicable): N/A
Precinct(s): Countywide

Fiscal and Personnel Summary

Service Name				
	Current Fiscal Year Cost			**Annual Fiscal Cost**
	Labor	**Non-Labor**	**Total**	**Recurring Expens**
Funding Sources				
Existing Budget				
Choose an item.	$	$	$	$
Choose an item.	$	$	$	$
Choose an item.	$	$	$	$
Total Current Budget	$	$	$	$
Additional Budget Request (*Requires Fiscal Review Request Form*)				
Choose an item.	$	$	$	$
Choose an item.	$	$	$	$
Choose an item.	$	$	$	$
Total Additional Budget Request	$	$	$	$
Total Funding Request	**$**	**$**	**$**	**$**
Personnel (Fill out section only if requesting new PCNs)				
Current Position Count for Service	-	-	-	-
Additional Positions Request	-	-	-	-
Total Personnel	-	-	-	-

Anticipated Court Date: 4/23/2024
Anticipated Implementation Date (if different from Court date):

Emergency/Disaster Recovery Note: Not an emergency, disaster, or COVID-19 related item

Contact(s) name, title, department: Carmella Sanford, Executive Assistant to Mike Post, County Auditor

Attachments (if applicable)**:**