

Town of Bowling Green
Town Council Meeting



Date: November 2, 2017
Agenda Item: IV (C) Budget Amendment

TYPE OF AGENDA ITEM:

- CONSENT AGENDA
- PRESENTATION
- ACTION ITEM
- TOWN MANAGER & STAFF COMMENTS
- PUBLIC HEARING
- Duly Advertised

PURPOSE OF ITEM:

- INFORMATION ONLY
- DISCUSSION ONLY
- DISCUSSION AND/OR DECISION
 - Introduction
 - Ordinance
 - By Motion
 - Certificate
 - Resolution
 - Grant/MOU
 - Bylaws

PRESENTER: Reese Peck

PRESENTER TITLE: Town Manager

AGENDA ITEM: IV (C) Budget Amendment

BACKGROUND / SUMMARY:

The attached supplemental budget request is to allow a \$68,000 transfer to the Capital Fund needed to fund the purchase of the new police car and one replacement truck for public works. It establishes a \$12,000 personnel contingency fund for part time / seasonal workers for public works and town hall support.

ATTACHMENTS:

Budget Action Form

REQUESTED ACTION:

Approve the attached Budget Action Form and authorize the Mayor to sign on behalf of the Town.

FOR MORE INFORMATION, CONTACT:

Phone #: 804-633-6212

Email: Townmanager@townofbowlinggreen.com

Name:

Reese Peck

FOR USE DURING MEETING

Y	N		Y	N
<input type="checkbox"/>	<input type="checkbox"/>	Coleman	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	Davis	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	Gaines	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	Hauser	<input type="checkbox"/>	<input type="checkbox"/>

VOTE:

PASS

NOT PASSED

McDearmon
Wright
Gibson
Satterwhite



Town of Bowling Green
VIRGINIA

BUDGET ACTION FORM

BAF#

(Assigned by Finance Dept)

Requesting Dept./Organization: Town Manager FY 18

Explanation of Request (please attach second page of form if additional space is required):
The \$68,000 transfer to the Capital Fund is needed to fund the purchase of the new police car and one replacement truck for public works. \$12,000 is requested for a personnel contingency fund for part time / seasonal workers for public works and town hall support.

Budget Supplement: [checked] Budget Transfer: [] Journal Entry: []

Funding Details (for additional space, please go to second page of form)

Table with columns: From (Source, Budget Code, Amount), To (Budget Code, Amount). Includes rows for Unassigned Fund Balance, 100-410501-0300 (\$68,000.00), 100-12110-3100 (\$12,000.00), and a Total row showing \$80,000.00.

Department Head Signature : _____ Date: 10/27/2017

Treasurer Recommendation:

Approve: Yes [checked] No [] Signature [Signature] Date: 10/27/2017
Comments:

Town Manager Recommendation (if required):

Approve: Yes [checked] No [] Signature [Signature] Date: 10/27/2017
Comments:

Council Action (if required):

Approval: Yes [] No [] Signature _____ Date: _____
Yes [] Administrator granted approval authority