From:	1100		*	From	n: Company/Acco	ANIMAL SERVICES ounting Unit Name		_		
	Company #							N.		
counting						Finance D				
Unit	Account	Sub-Account	Title		Amount	Prior to Transfer	le Balance	Date of		
		T					After Transfer	Balance		
1300	53828		CONTINGENCIES	\$	3,200.00	94,524.00	91,324.0	0 7/31/25		
				-						
-	-			+-				1		
			Total	\$	3,200.00					
				V	A	ANIMAL SERVICES	ŧo			
To:	1100 Company #			To: Co	ompany/Accoun	ting Unit Name				
counting							pt Use Only Balance	Date of		
Unit	Account	Sub-Account	Title	Amount		Prior to Transfer	After Transfer	Balance		
1300	54120		AUTOMOTIVE EQUIPMENT	\$	3,200.00	86,200.00	89,400.00	1 1		
				-						
				-						
			Total	S	3,200.00					
R	eason for Req	uest:	a	Establis						
			To cover the cost of transporting two Ford Transit vehicle	es to and	from Mavron fo	or upfitting.				
			-							
								1 1		
								6/30/20		
				Depart	ment Head	MAK		Date		
					(100		45/5/		
	Activity			Chief Financial Officer Date						
			(optional) ****Please sign in blue ink on	the origi	nal form****		*			
			Finance Department Use Onl		i.		3			
		-		75.						
Fis	scal Year	Budget Jo	ournal # Acctg Period					1		

AS - 8/19/25 FIN/CB - 8/26/25



From:				Fro	m: Company/Acco	RECORDER G.I.S.		-
ccounting	Company #						ept Use Only	
Unit	Account	Sub-Account	Title		Amount	Prior to Transfer	After Transfer	Date of Balance
				Τ.			Alter transfer	1 - 1
4320	50010		OVERTIME	\$	5,000.00	5,000.00	P	3/19/25
4320	51030		EMPLOYER SHARE SOCIAL SECURITY	\$	1,290.00	3,184: 43	1,894.43	8/19/25
				-				
			Total	\$	5 200 00			
			Total	>	6,290.00	BECORDER C.I.S.		
To:	1100 Company #			To:	Company/Accoun	RECORDER G.LS. ting Unit Name		-1
Si Si	and the state of t					Finance De	pt Use Only	
counting							e Balance	Date of
Unit	Account	Sub-Account	Title		Amount	Prior to Transfer	After Transfer	Balance
4320	51010		EMPLOYER SHARE I.M.R.F.	s	4,565.00	12,512.04	2,052.96	8/19/25
4320	51040		EMPLOYEE MED & HOSP INSURANCE	\$	1,725.00	911.30	2,636.30	8/19/25
				+				
			Total	\$	6,290.00			
ı	Reason for Requ	uest:						
			To cover underbudgeted amounts in employee benefits:	IMRF,	Social Security & N	Medical Insurance.		
		Į						cel inhi
				Depa	ertrognt Head			Date
	Activity			Chief	Financial Officer	-104		8) N 8
			(optional)					999 (1) [[]
Γ			Finance Department Use Onl	У				
F	iscal Year 2	S Budget Jo	ournal# Acctg Period	50				
E	intered By/Dat	e	Released & Posted	By/Da	ite			

FIN-8/26/25 CB-8/26/25 do

	1100	_		From		DER DOCUMENT STO unting Unit Name	DRAGE	-
ccounting	Company #						ept Use Only e Balance	Date of
Unit	Account	Sub-Account	Title		Amount	Prior to Transfer	After Transfer	Balance
4310	50040		PART TIME HELP	\$	10,000.00	10,000,00	× ×	8/19/25
4310	50010		OVERTIME	s	750.00	10,000.00	9.250,00	3/19/25
	50010		OVERNINE	ľ	730.00		1,20-100	37. 172
				-				
			Total	\$	10,750.00		-	
7620	50000					DER DOCUMENT STO	RAGE	
To:	1100 Company #			To: Co	mpany/Account	ing Unit Name		
ì	company #					Finance De	pt Use Only	
ccounting						Available	Balance	Date of
Unit	Account	Sub-Account	Title		Amount	Prior to Transfer	After Transfer	Balance
4310	51010		EMPLOYER SHARE I.M.R.F.	\$		8,537.36		8/19/25
4310	51030		EMPLOYER SHARE SOCIAL SECURITY	\$	1,500.00	8,179.75	9,679.75	8/19/25
4310	51040		EMPLOYEE MED & HOSP INSURANCE	\$	4,000.00	16,182.25	20,172.25	8/19/25
4310	51000		BENEFIT PAYMENTS	\$	1,500.00	(1,489.13)	10.87	8/19/25
						-, -, -, -,		
			Total	s	10,750.00			
				-	20, 2000			
	Reason for Req	5	To cover for underbudgeted cost of employee benefits: I	MRF, Soc	cial Security, Hea	Ith Insurance & Bene	efit Payout.	
								_1 _1
	Activity				mant Head	ОЙ		Eligion Date
	Activity		optional)		केलुंगो में स्वयं inancial Officer	My		Salalace Spot
	Activity		(optional) ****Please sign in blue ink on	Chief F	inancial Officer	Й		Ediglac Spate
	1		****Please sign in blue ink on Finance Department Use On	Chief F the origi	inancial Officer	Й		Ediglac Spate
Fi	Activity iscal Year <u>2</u>		****Please sign in blue ink on	Chief F the origi	inancial Officer	Жų		Ediglac Date No.

FIN-8/26/25 CB-8/26/25 8

From:	1000			DUNTS				
	Company #	npany #				unting Unit Name Finance Dep Available	Date of	
Unit	Account	Sub-Account	Title		Amount	Prior to Transfer	After Transfer	Balance
			GENERAL FUND CONTINGENCIES	\$	364,300.00	4,602,593.00	4,238,293.00	8/20/25
1180	53828		dentifications continued and	7	304,300.00		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
			Total	\$	364,300.00			
					INFO	' RMATION TECHNOLO	OGY	
To:	1000 Company #	_		To: 0	Company/Accoun			
Accounting	oompan,					Finance Dep Available		Date of
Unit	Account	Sub-Account	Title		Amount	Prior to Transfer	After Transfer	Balance
1110	52100		I.T. EQUIPMENT-SMALL VALUE	\$	284,300.00	3,308.42	287,608.42	8/20/25
1110	54100		IT EQUIPMENT	\$	80,000.00	0.00	80,000.00	8/20/25
			Total	\$	364,300.00			
	Reason for Red	quest:	Budget transfer from General Fund Contingencies to supply. This will reduce the FY2026 budget expense.	Inform	ation Technology	for laptops and UP.	S backup power	
	Activity	,			ertment Head	-WI		Date 8/21/2025 Date
			(optional) ****Please sign in blue ink o	n the or	iginal form****			
			Finance Department Use C	nly				
	Fiscal Year	Budget	lournal# Acctg Period					
	Entered By/D	ate	Released & Post	ed By/D	ate			

From:	1000		GENERAL FUND SPECIAL ACCOUNTS From: Company/Accounting Unit Name						
	Company #					Finance De	Date of		
Unit	Account	Sub-Account	Title		Amount	Prior to Transfer	After Transfer	Balance	
		Jub / 10000		Τ.			4,472,593.00	8/20/25	
1180	53828		GENERAL FUND CONTINGENCIES	\$	130,000.00	4,602,593.00	4,472,333.00	0/20/25	
				1					
				+					
				_					
			Total	\$	130,000.00				
					GENERAI	FUND SPECIAL ACC	OUNTS		
To:	1000			To: Co	ompany/Account			-	
	Company #	-			, inpany, necesario	ang ome rame			
						Finance De	pt Use Only		
Accounting							Balance	Date of	
Unit	Account	Sub-Account	Title	_	Amount	Prior to Transfer	After Transfer	Balance	
1180	57060	100	INFRASTRUCTURE FUND	\$	130,000.00	0.00	130,000.00	8/20/25	
				1					
				-					
		1	Total	1,	130,000,00				
			Total	\$	130,000.00				
	Reason for Rea	uest:							
			Budget transfer from General Fund Contingencies to T	ransfer	Out County Infr	astructure Fund for	the		
			replacement of worn jury seating in 4 courtrooms to re	elieve pr	essures on the F	Y2026 budget.			
		L							
				Depar	tment Head	7/11		Date	
						- MM		8/21/2025	
	Activity			Chief	Financial Officer	/ /		Date	
	,	-	(optional)	001	manetal officer			Dute	
			****Please sign in blue ink on	the orig	inal form****				
Γ			Finance Department Use Onl	У					
	Fiscal Year	Budget J	ournal # Acctg Period						
	Entered By/Da	te	Released & Posted	By/Dat	te				
L									

From:	6000			From		TRUCTURE CONTING	SENCY	-
Accounting	Company #	-				Finance De Available	Date of	
Unit	Account	Sub-Account	Title		Amount	Prior to Transfer	After Transfer	Balance
1195	53828		INFRASTRUCTURE CONTINGENCIES	\$	130,000.00	4,670,153.00	4,540,153.00	8/20/25
			Total	\$	130,000.00			
					FAC MG	MT CTY INFRASTRUC	CTURE	
To:	6000 Company #	-		To: C	ompany/Account			-
Accounting							pt Use Only Balance	Date of
Unit	Account	Sub-Account	Title		Amount	Prior to Transfer	After Transfer	Balance
1220	54090		FURNITURE & FURNISHINGS	\$	130,000.00	0.00	130,000.00	8/20/25
				_				
				-				
			Total	\$	130,000.00			
	Reason for Req	uest:						
			Budget transfer from Infrastructure Contingencies to Fi seating in 4 courtrooms to relieve pressures on the FY20		-	or the replacement o	of worn jury	
				Depai	tment Head	QM.		Date
	Activity		(optional)	Chief	Financial Officer	- / / /		8/21/2025 Date
			****Please sign in blue ink on	the orig	ginal form****			
			Finance Department Use On	ly		· · · · · · · · · · · · · · · · · · ·		
	Fiscal Year	Budget J	ournal # Acctg Period					
	Entered By/Da	te	Released & Posteo	l By/Da	te			