

COUNTY OF GALVESTON
REQUEST FOR BUDGET AMENDMENT/TRANSFER

Department:	Human Resources	25-85-0217-E
Date Submitted:	2/10/2025	(Assigned by Department of Professional Services)

COMMISSIONER'S COURT ACTION:

Please complete the following form in its entirety and submit to the Budget Office at least eleven (11) days prior to the first regularly scheduled Tuesday Commissioners Court meeting date each month. Emergency amendments will be processed at the earliest available Court meeting date. If information on this form is incomplete, the amendment will be returned to your office for completion. It is suggested that the department requesting the amendment be present on the date of its submittal to the Court for action.

GENERAL EXPLANATION:

Request transfer from Employee Benefits - Prescription Drug Claims Paid to Employee Benefits - Employee/Retiree Clinics and Employee/Retiree Pharmacy to fund expenses for FY2025.

This budget amendment does not increase the budget for FY 2025

TRANSFER FROM				Auditor Use Only Account Balance Sufficient (Y/N)
Fund	Department	Line Item	Amount	
6123 - Employee Benefits	155023 - Employee Benefits	5491514 - Prescription Drug Claims Paid	625,000.00	
TOTAL - Transfer From			625,000.00	
TRANSFER TO				Auditor Use Only Account Balance Sufficient (Y/N)
Fund	Department	Line Item	Amount	
6123 - Employee Benefits	155023 - Employee Benefits	5412010 - Employee/Retiree Clinics	440,000.00	
6123 - Employee Benefits	155023 - Employee Benefits	5412011 - Employee/Retiree Pharmacy	185,000.00	
TOTAL - Transfer To			625,000.00	

ADDITIONAL COMMENTS:


Budget Office Authorization 2/10/2025
Date

AUDITOR'S REVIEW

This budget amendment has been reviewed for validity of accounts and sufficiency of account balances used for budget transfer.

Reviewed by: Randall Rice CPA Date: 02/11/2025

Auditor's Remarks:

COMMISSIONERS COURT APPROVAL

Date Submitted: _____ Date Approved: 2/17/2025

****Galv Cnty Production****
Budget to Actual Figures

Run: 02/06/2025

Ledger: GL
Fiscal Year: 2025 2 February

Budget: OB

Ke **Title**
6123155023 **Employee Benefits**

Director
Dir of Fin/Admin/Budget Office

Object	Description	Budget	Actual	Encumbrance	Balance
5491514	Prescription Drug Claims Paid	4,500,000.00	530,208.29	0.00	3,969,791.71
	Total Revenue	0.00	0.00	0.00	0.00
	Total Expense	4,500,000.00	530,208.29	0.00	3,969,791.71
	Net Total (Revenue - Expense)	(4,500,000.00)	(530,208.29)	0.00	3,969,791.71

****Galv Cnty Production****
Budget to Actual Figures

Run: 02/06/2025

Ledger: GL
Fiscal Year: 2025 2 February

Budget: OB

Ke **Title**
6123155023 **Employee Benefits**

Director
Dir of Fin/Admin/Budget Office

Object	Description	Budget	Actual	Encumbrance	Balance
	Grand Total Revenue	0.00	0.00	0.00	0.00
	Grand Total Expense	4,500,000.00	530,208.29	0.00	3,969,791.71
	Grand Totals (Revenue - Expense)	(4,500,000.00)	(530,208.29)	0.00	3,969,791.71

FY25 Budget Amendment Request

Row 129

Commissioners' Court Status

Fiscal Year 2025

**Budget
Amendment
Number** 25-85-0217-E

Sponsor: County Judge, Honorable Mark Henry

Department: Human Resources

**Agenda Item
Caption** Request transfer from Employee Benefits - Prescription Drug Claims
Paid to Employee Benefits - Employee/Retiree Clinics and
Employee/Retiree Pharmacy to fund expenses for FY2025.

Amount \$625,000.00

Notes

**Amount From
General Fund
Budgeted
Reserves** \$625,000.00

**Division
Number:** 151400

**Department
Head Name:** Sergio Cruz

**Department
Head Email:** sergio.cruz@galvestoncountytexas.gov

Submitted By: Joselinne Piedras

**Contact
Extension
Number:** 2296

**Contact Email
Address:** Joselinne Piedras


**Associated
Forms** Not Applicable

**Budget
Amendment
Justification:** Employee Benefits needs funding

Key Org (From): 6123155023

Object Code
From (Line 5491514
Item):


Amount (From): \$625,000.00

Add an
additional Key 
Org (From):

(2) Key Org
(From):

(2) Object Code
From (Line
Item):


(2) Amount
(From):

(3) Add an
additional Key 
Org (From):

(3) Key Org
(From):

(3) Object Code
(Line Item):

(3) Amount
(From):

(4) Add an
additional Key 
Org (From):

(4) Key Org
(From):

(4) Object Code
(Line Item):

(4) Amount
(From):

Key Org (To): 6123155023

Object Code
(Line Item): 5412010

Amount (To): \$440,000.00

Add an
additional Key 

Org (To):

**(2) Key Org
(To):** 6123155023

**(2) Object Code
To (Line Item):** 5412011

(2) Amount (To): \$185,000.00

**(3) Add an
additional Key** 
Org (To):

**(3) Key Org
(To):**

**(3) Object Code
To (Line Item):**

(3) Amount (To):

**(4) Add an
additional Key** 
Org (To):

**(4) Key Org
(To):**

**(4) Object Code
To (Line Item):**

(4) Amount (To):

(5) Key Org (To)

**(5) Object Code
To (Line Item):**

(5) Amount To:

Total (From) \$625,000.00

Total (To) \$625,000.00