

**COUNTY OF GALVESTON
REQUEST FOR BUDGET AMENDMENT/TRANSFER**

Department: Veteran's Treatment Court	25-25-1112-B
Date Submitted: 11/5/2024	(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 within Veteran's Treatment County from Court Appointed Attorneys to Various Line Items to fund additional expenses for FY25.

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	
1208 - County Specialty Court Fund	120900 - Veteran's Treatment Court	5431201 - Court Appointed Attorneys	4,150.00	
TOTAL - Transfer From			4,150.00	

TRANSFER TO				Auditor Use Only Account Balance Sufficient (Y/N)
Fund	Department	Line Item	Amount	
1208 - County Specialty Court Fund	120900 - Veteran's Treatment Court	5496301 - Business Mileage Reimbursement	4,000.00	
1208 - County Specialty Court Fund	120900 - Veteran's Treatment Court	5112001 - Vacation/Sick Leave Payout	50.00	
1208 - County Specialty Court Fund	120900 - Veteran's Treatment Court	5151000 - County Paid Health Ins Premium	50.00	
1208 - County Specialty Court Fund	120900 - Veteran's Treatment Court	5152102 - Medicare FICA Payments	50.00	
TOTAL - Transfer To			4,150.00	

ADDITIONAL COMMENTS:


 Sergio Cruz
 Budget Office Authorization

11/5/2024
 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: Madelina Walker CPA Date: 11/5/2024

Auditor's Remarks:

COMMISSIONERS COURT APPROVAL

Date Submitted: _____ Date Approved: 11/12/2024

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

Run: 11/04/2024

Ledger: GL
Fiscal Year: 2025 11 November

Budget: OB

Ke **Title** **Director**
 1208120900 Veteran's Treatment Court County Judge

Object	Description	Budget	Actual	Encumbrance	Balance
5431201	Crt Apptd Attorneys	24,000.00	0.00	0.00	24,000.00
	Total Revenue	0.00	0.00	0.00	0.00
	Total Expense	24,000.00	0.00	0.00	24,000.00
	Net Total (Revenue - Expense)	(24,000.00)	0.00	0.00	24,000.00

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

Run: 11/04/2024

Ledger: GL
Fiscal Year: 2025 11 November

Budget: OB

Ke **Title** **Director**
 1208120900 Veteran's Treatment Court County Judge

Object	Description	Budget	Actual	Encumbrance	Balance
	Grand Total Revenue	0.00	0.00	0.00	0.00
	Grand Total Expense	24,000.00	0.00	0.00	24,000.00
	Grand Totals (Revenue - Expense)	(24,000.00)	0.00	0.00	24,000.00

FY25 Budget Amendment Request

Row 41

Commissioners' Court Status

Fiscal Year 2025

**Budget
Amendment
Number** 25-25-1112-B

Sponsor: County Judge, Honorable Mark Henry

Department: Galveston County Veterans Treatment Court

**Agenda Item
Caption** Request transfer from within Veteran's Treatment County from Court
Appointed Attorneys to Various Line Items to fund additional
expenses for FY25.

Amount \$4,150.00

Notes

**Amount From
General Fund
Budgeted
Reserves**

**Division
Number:** 120900

**Department
Head Name:** Mark Henry

**Department
Head Email:** christopher.james@galvestoncountytexas.gov

Submitted By: Christopher James

**Contact
Extension
Number:** 2679

**Contact Email
Address:** christopher.james@galvestoncountytexas.gov

**Associated
Forms** Not Applicable

**Budget
Amendment
Justification:** FY 25 budget is missing objects that are needed for vendor invoices

Key Org (From): 1,208,120,900.00

**Object Code
From (Line Item):** 5431201 Crt Apptd Attorneys

Amount (From): \$4,150.00

**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): 1,208,120,900.00

**Object Code
(Line Item):** 5496301-Business Mileage Reimbursement

Amount (To): \$4,000.00

**Add an
additional Key**

Org (To):

**(2) Key Org
(To):** 1208120900

**(2) Object Code
To (Line Item):** 5112001- Vacation/ Sick Leave Payout

(2) Amount (To): \$50.00

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

**(3) Key Org
(To):** 1208120900

**(3) Object Code
To (Line Item):** 5151000-County Paid Health Care Ins Premium

(3) Amount (To): \$50.00

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

**(4) Key Org
(To):** 1208120900

**(4) Object Code
To (Line Item):** 5152102- Medicare FICA Payments

(4) Amount (To): \$50.00

(5) Key Org (To)

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

(5) Amount To:

Total (From) \$4,150.00

Total (To) \$4,150.00