City of Meridian FY2021 Budget Amendment Form

| Personnel Costs Full Time Equivalent (FTE): | | | | | | | \sim 0 \sim | | | | | | |
|--|------------|-------|------------------------|------------------------------|------------------------------------|----------------|---------------------------------|--|-------|-------------------|---------------|-----------------|--------------|
| | | | G/L# Description Total | | | (*// ERIDIAN* | | | | | | | |
| 01 | 0 | 41200 | 0 | Wages | | | | | | | \widehat{I} | | |
| 01 | 0 | 41206 | 0 | PT/Seasonal Wages | | | | | | | | DAHO | |
| 01 | 0 | 41210 | 0 | Overtime | | | Please only complete the fields | | | | | | |
| 01 | 0 | 41304 | 0 | Uniform Allowance | | | highlighted in Orange. | | ige. | | | | |
| 01 | 0 | 42021 | 0 | FICA | \$ | - | | | | | | dment Details | |
| 01 | 0 | 42022 | 0 | PERSI | \$ | - | Title: | Title: Treasure Valley Yo | | uth Safet | / Summit | | |
| 01 | 0 | 42023 | 0 | Worker's Comp | \$ | - | | Department Name: | | M | ayor's Office | | |
| 01 | 0 | 42025 | 0 | Employee Insurance | \$ | - | Pr | Presenting Department Name: Mayor's Office | | | | | |
| Total Personnel Costs \$ - Department #: | | | | | | | | | | | | | |
| Operating Expenditures Primary Funding Source: 1 | | | | | | | | | | | | | |
| Fund# | Dept.# | G/L# | Proj.# | G/L# Description | One-Tim | ne | On-Going | 7 | Γotal | , | | P#: | |
| 01 | 1310 | 52710 | 0 | Community Events Expenses * | \$ 7, | 000 | | \$ | 7,000 | | | t #: | |
| 01 | 0 | | 0 | , | | | | \$ | - | | | | - |
| 01 | 0 | | 0 | | | | | \$ | - | Is this for a | n Emerger | ıcy? ☐ Yes ☑ No | |
| 01 | 0 | | 0 | | | | | \$ | - | New Lev | el of Serv | ice? 🗌 Yes 🗹 No | |
| 01 | 0 | | 0 | | | | | \$ | - | | | | |
| 01 | 0 | | 0 | | | | | \$ | - | CI | erks Offic | e Stamp | |
| 01 | 0 | | 0 | | | | | \$ | - | | | | |
| 01 | 0 | | 0 | | | | | \$ | - | | | | |
| 01 | 0 | | 0 | | | | | \$ | - | | | | |
| 01 | 0 | | 0 | | | | | \$ | - | | | | |
| 01 | 0 | | 0 | | | | | \$ | - | | | | |
| 01 | 0 | | 0 | | | | | \$ | - | | | | |
| 01 | 01 0 0 | | | | <u> </u> | | \$ - Date of Council Approval | | | val | | | |
| | | | | Total Operating Expenditures | \$ 7, | 000 | \$ - | \$ | 7,000 | | | | |
| Capital 0 | Outlay | | | | | | | | | | | | |
| Fund# | Dept.# | G/L# | Proj.# | G/L# Description | Total | | Acknowle | edge | ment | | | Date | |
| 01 | 0 | | 0 | | | | D. 'd M'/ | | | (/21/2021 | | | |
| 01 | 0 | | 0 | | | | David Miles 6/21/2021 | | | | | | |
| 01 | 0 | | 0 | | | | Department Director APPROVED | | | | DD 0/04/0004 | | |
| 01 | 0 | | 0 | | | | | | | By Todd Lavoie | at 4:42 nm | Jun 21, 2021 | BP 6/21/2021 |
| 01 | 0 | | 0 | | | | | | | Ey . Odd Lavole (| μι τ.τ. ριιι | , 0411 21, 2021 | |
| 01 | 0 | | 0 | | <u> </u> | | Chief Fina | | | | | | |
| | | | | Total Capital Outlay | Approved Treg Bernt 3:53 6/21/2021 | | | | | | | | |
| Revenue | /Donations | | | | | | | | - | | | | |
| Fund# | Dept.# | G/L# | Proj.# | G/L# Description | Total | | Council Li | aison | / | | | | |
| 01 | 0 | | 0 | | | | (12 | | 19 | _ | | 6-22-21 | |
| 01 | 0 | | 0 | | | | | MIL | | | | U-ZZ-Z I | |
| 01 | 0 | | 0 | | | | Mayor | | | | | _ | |
| | | | | Total Revenue/Donations | \$ | | | | | | | | |
| Total Amendment Request \$ | | | | | | | | | | | \$ | 7,000 | |

City of Meridian FY2021 Budget Amendment Form

| | Prior Year(s) | Fiscal Year | Fiscal Year | Fiscal Year | Fiscal Year | Fiscal Year | Department Name: Mayor's Office | | | | | | | |
|---|--|---------------|-------------|--|-------------|--------------------|--|--|--|--|--|--|--|--|
| | Funding | 2021 | 2022 | 2023 | 2024 | 2025 | Title: Treasure Valley Youth Safety Summit | | | | | | | |
| Personnel | | \$ - | \$ - | \$ - | \$ - | \$ - | Instructions for Submitting Budget Amendments: | | | | | | | |
| Operating | | \$ 7,000 | \$ - | \$ - | \$ - | \$ - | > Department will send Amendment with Directors signature to Finance (Budget Analyst) for review | | | | | | | |
| Capital Total | \$ - | \$ 7,000 | ċ | \$ - | \$ - | \$ - | Finance will send Amendment to Council Liaison for signature | | | | | | | |
| TOLAI | \$ - | \$ 7,000 | \$ - | т | | | > Council Liaison will send signed Amendment to Mayor | | | | | | | |
| Evaluati | Viral partian Operations | | | | | | | | | | | | | |
| | Please answer all Evaluation Questions using the financial data referenced above | | | | | | | | | | | | | |
| | Department will add copy of Afficial International Council Agents using notice Agents manager | | | | | | | | | | | | | |
| 1. Describe what is being requested? | | | | | | | | | | | | | | |
| * This is a net-zero budget amendment using FY2020 donated revenues applied to the costs of the upcoming FY2021 Treasure Valley Youth Safety Summit being held in | | | | | | | | | | | | | | |
| September, 2021. The FY2020 donated funds were provided for MYAC related events and not utilized in 2020 due to COVID. The donating sponsor and Finance approve the use | | | | | | | | | | | | | | |
| of 2020 donated revenue for FY2021 youth expenses. | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| E- | 2. Why was this budget request not submitted during the current fiscal year budget cycle? | | | | | | | | | | | | | |
| This event is based on receiveing donated revenues to cover expenses. Budget amendments are the appropriate tool capture donated revenue to cover expenses. | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| 3. What is the explanation for not submitting this budget request during the next fiscal year budget cycle? | | | | | | | | | | | | | | |
| Event occurs in current (FY21) fiscal year. | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| 1 Describ | 4. Describe the proposed method of funding? If funding is split between Funds (i.eGeneral ,Enterprise, Grant), please include the percentage split. List the amounts and | | | | | | | | | | | | | |
| | | | _ | ult from approval of | | erur ,Eriterprise, | , drainty, pieuse moidae the percentage spine. Eist the amounts and | | | | | | | |
| | | | | The second secon | 1 | | | | | | | | | |
| Donated r | revenue used to | cover funding | neeas. | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| 5. Does this request align with the Department/City's strategic plan? If not, please explain how this request was not included in the Department/City strategic plan? | | | | | | | | | | | | | | |
| Yes - youth engagement and programs. | | | | | | | | | | | | | | |
| 6. Does this request require resources to be provided by other departments? If yes, please describe the necessary resources to be provided by other departments. | | | | | | | | | | | | | | |
| No | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| 7. Does this Amendment include any needed Equipment or Software that will utilize the City's network? (Yes or No) | | | | | | | | | | | | | | |
| 8. Is the amendment going to result in the disposal of an asset? (Yes or No) | | | | | | | | | | | | | | |
| 9. Any additional comments? | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| N/A | IVA | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |

Total Amendment Request \$ 7,000

Every effort should be made to avoid reopening the budget for an amendment. Departments will need to provide back up and appear before the City Council to justify budget amendments.

Budget amendments are intended for emergency or mandatory changes to the original balanced budget. Changes to the original balanced budget may cause a funding shortfall.

City Of Meridian

Posted General Ledger Transactions - GL Transaction Detail Report - Brad

| F C | De Code | G/L Code | Proj Code | Effective Date | Transaction Description | ID | Amount | Session ID | Document Number |
|--------|------------|-------------|--------------|-------------------|--|------|-------------|------------|--------------------|
| 01 | 1313 | 34800 | 0136 | 12/9/2019 | Idaho Central Credit Union: Donation to Mayors Office, MYAC, ck# 73572 | ICCU | (10,000.00) | CR20-159 | 31817 |
| Repor | t Total | | | | | | (10,000.00) | | |