



# LUZERNE COUNTY BUDGET TRANSFER REQUEST

Department Name: Public Defender's Office      Dept #: 4152

Action Type	Action	Fund	Div	Dept	Acct	Amount	Account Description
+ Line Item Increase	+	100	80	4152	550.20	4,000	Stenography
- Line Item Decrease	-	100	80	4152	550.17	(4,000)	Examinations/Witnessess
<b>Total</b>						<b>0</b>	<i>(Must equal 0)</i>

**Explanation (Attach memo if necessary)**

The Public Defender Office requests the transfer of funds from Examinations/ Witnesses to Stenographing services to pay for the professional stenographing services received that exceeds the amount that was budgeted. Examinations / Witnesses has a surplus of funds because the Public Defender office did not handle a capital murder case in 2017.

Department Head _____ Date _____	Division Head <i>[Signature]</i> Date <i>10/18/17</i>
County Manager <i>[Signature]</i> Date <i>10/18/17</i>	Budget & Finance Division Head <i>[Signature]</i> Date <i>10-16-17</i>