

LUZERNE COUNTY BUDGET TRANSFER REQUEST

Department Name _____ Dept # _____
 Area Agency on Aging _____ 9100

Action Type	Action	Fund	Div	Dept	Acct	Amount	Account Description
+ Line Item Increase	-	910	70	9100	510.20	(17,476)	Wages - Represented
- Line Item Decrease	-	910	70	9100	520.10	(1,084)	FICA
	-	910	70	9100	520.15	(253)	Medicare
	-	910	70	9100	520.20	(24,000)	Unemployment
	-	910	70	9100	560.37	(50,000)	Caregiver Program
	-	910	70	9100	540.37	(37,187)	Medical Supplies
	+	910	70	9100	540.17	15,000	Program Expenses
	+	910	70	9100	540.25	100,000	Computer Hardware
	+	910	70	9100	550.45	15,000	Repairs Main/Building
Total						0	(Must equal 0)

Explanation (Attach memo if necessary)

We are transferring funds from represented salaries, social security and medicare because we are eliminating a part time Aging Case Aide 1 position that was included in our budget for 2018. We are transferring funds from unemployment payroll taxes because it was budgeted at \$ 600.00 per person but when payroll reports were received from Budget and Finance the tax is only \$ 388 per person for 2018. We are transferring funds from the Caregiver Program because the consumer base is low in that program at this time thereby reducing the spending. We are transferring funds from medical supplies because we are no longer offering this program to new consumers and the spending for existing consumers will be considerably less than budgeted. We are increasing program expenses to cover the additional expenses in the health and wellness program in partnership with the City of Wilkes-Barre . We are increasing Computer Hardware to upgrade our technology in anticipation of PDA changes to the Assessment Program and Fiscal Reporting Requirements effective 7/1/18. We are increasing building maintenance and repairs due to upgrades at the small Active Adult Centers to convert to the county phone system.

<i>Mary Rose</i> Department Head	5/15/18 Date	<i>Lynn Thi</i> Division Head	5/21/18 Date
<i>D. W. Thi</i> County Manager	6/1/18 Date	<i>Brian A. ...</i> Budget & Finance Division Head	5/30/18 Date

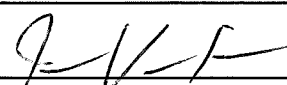
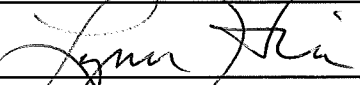
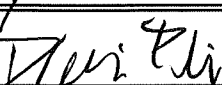



LUZERNE COUNTY
BUDGET TRANSFER REQUEST

Department Name: Luzerne County Children & Youth Dept #: 920

Action Type	Action	Fund	Div	Dept	Acct	Amount	Account Description
+ Line Item Increase	+	920	70	9200	540.22	200,000	Computer Software
- Line Item Decrease	-	920	70	9200	560.66	(200,000)	Misc Indirect Cost
+ Line Item Increase	+	920	70	9200	550.19	5,000	Special Legal Services
- Line Item Decrease	-	920	70	9200	560.66	(5,000)	Misc Indirect Cost
Total						0	<i>(Must equal 0)</i>

Explanation (Attach memo if necessary)
 Increase in Computer Software due to the purchase of licenses for Quick Books & Microsoft End User Licenses. Increase in Special Legal Services expenses exceeded original amount budgeted due to more children coming into the system. Decrease Miscellaneous Indirect Cost due to a reduction in anticipated services.

 Department Head	5/24/18 Date	 Division Head	5/27/18 Date
 County Manager	6/1/18 Date	 Budget & Finance Division Head	5/30/18 Date



LUZERNE COUNTY BUDGET TRANSFER REQUEST

Department Name	Dept #
Assessment Office	4136

Action Type	Action	Fund	Div	Dept	Acct	Amount	Account Description
+ Line Item Increase	+	100	20	4136	550.29	14,000	Mileage
- Line Item Decrease	-	100	20	4136	550.15	(8,000)	Other Contractual
		100	20	4136	560.64	(6,000)	Meetings/Conference/Trainings
Total						0	<i>(Must equal 0)</i>

Explanation (Attach memo if necessary)

Budget transfer is required to cover mileage reimbursement estimate for the remainder of the year. This includes additional pictometry site visits as necessary.

Department Head Date	Division Head Date
County Manager Date	Budget & Finance Division Head Date



LUZERNE COUNTY BUDGET TRANSFER REQUEST

Department Name	Dept #
Tax Collection	4137

Action Type	Action	Fund	Div	Dept	Acct	Amount	Account Description
+ Line Item Increase	+	100	20	4137	590.12	500	Tax Collector Supplies
- Line Item Decrease	-	100	20	4137	590.30	(500)	To Governmental units
Total						0	<i>(Must equal 0)</i>

Explanation (Attach memo if necessary)
 Budget transfer is required to fund tax collector supplies reimbursement.

Department Head	Date
Division Head	Date
County Manager	Date
Budget & Finance Division Head	Date



**LUZERNE COUNTY
BUDGET TRANSFER REQUEST**

Department Name _____ Dept # 4151
Solicitor _____

Action Type	Action	Fund	Div	Dept	Acct	Amount	Account Description
+ Line Item Increase	+	100	16	4151	540.14	2,000	Office Supplies
- Line Item Decrease	-	100	16	4154	550.20	(2,000)	Stenographic Services
Total						0	<i>(Must equal 0)</i>

Explanation (Attach memo if necessary)

Budget transfer is required to cover general office supplies needed for the office of law.

		<i>Parish</i>	<i>6/5/18</i>
Department Head	Date	Division Head	Date
<i>D. W. ...</i>	<i>6/5/18</i>	<i>Bram A. ...</i>	<i>6-5-18</i>
County Manager	Date	Budget & Finance Division Head	Date