

**ORDINANCE**

**RE: AMENDMENT TO THE COMBINED ANNUAL BUDGET AND APPROPRIATION  
ORDINANCE FOR CAPITAL IMPROVEMENTS**

**WHEREAS**, there is a need to increase the salary/personnel line in the capital improvements fund; and

**WHEREAS**, there is sufficient funds in the capital improvements budget to allow an out of category line item transfer; and

**WHEREAS**, the budget therefore needs to be amended accordingly and this was not known when the budget was prepared, and thus was not included.

**NOW, THEREFORE BE IT ORDAINED** by the County Board of Vermilion County Illinois that the County Auditor be authorized and instructed to amend the budget for fiscal year 2017-2018 by transferring money in the amount as below to facilitate an increase in the salary personnel line for capital improvements.

From:

041.910.00.04525	Capital Expense/ Buildings	\$6,000.00
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TO:

041.910.00.04101	Salary Personnel	\$6,000.00
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And the totals be adjusted accordingly.

**PRESENTED, APPROVED AND ORDAINED** by the County Board of Vermilion County, Illinois at the July 10, 2018 A.D. Session.

*This amendment takes two thirds majority for passage.*

DATED this 10<sup>th</sup> day of July 2018 A.D.

AYE 22 NAY      ABSENT 5

  
Chairman, Vermilion County Board

ATTEST:



ORDINANCE 18-0705

Clerk of the County Board

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Budget Amendment –Capital Improvements

APPROVED BY Finance /Personnel:

Steven Fourez  Y  N  A 7/2/18  
Chairman Date

Wesley Bieritz  Y  N  A

Robert Boyd  Y  N  A

Todd Johnson  Y  N  A

Becky Stark  Y  N  A

Bruce Stark  Y  N  A

Crisi Walls  Y  N  A

Request for Transfer  
Fiscal Budget  
2017 - 2018

Dept: Capital Improvements

Date: 6 - 20 - 18

From: Capital Expenditures

To: Salary - Personnel

Line Item	Description	Line Item	Description	Amount
041 - 910 - 00 - 04525	Capital Exp/ Buildings	041 - 910 - 00 - 04101	Salary - Personnel	\$ 6000
-	-	-	-	\$
-	-	-	-	\$
-	-	-	-	\$
-	-	-	-	\$
-	-	-	-	\$
-	-	-	-	\$
-	-	-	-	\$
-	-	-	-	\$

**NARRATIVE:**

Due to decommissioning of the annex, a temporary employee has been hired in the Supervisor of Assessment's office for additional assistance. This position will be through August.

Department Head: \_\_\_\_\_

**Approved By:**

\_\_\_\_\_ Committee

Finance Committee

Chairman

Chairman

Date: \_\_\_\_\_

Date: \_\_\_\_\_