



**MULTNOMAH COUNTY
AGENDA PLACEMENT REQUEST
BUDGET MODIFICATION**

(revised 08/02/10)

APPROVED: MULTNOMAH COUNTY
BOARD OF COMMISSIONERS
AGENDA # C-2 DATE 1-20-11
LYNDA GROW, BOARD CLERK

Board Clerk Use Only	
Meeting Date:	<u>1/20/11</u>
Agenda Item #:	<u>C-2</u>
Est. Start Time:	<u>9:30 am</u>

BUDGET MODIFICATION: NOND - 11

Agenda Title: BUDGET MODIFICATION # NOND-11, reclassifying one position in Information Technology
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Note: For all other submissions (i.e. Notices of Intent, Ordinances, Resolutions, Orders or Proclamations) please use the APR short form.

Requested Meeting Date:	<u>January 13, 2011</u>	Amount of Time Needed:	<u>N/A (Consent)</u>
Department:	<u>Nondepartmental</u>	Division:	<u>Information Technology</u>
Contact(s):	<u>Tony Dornbusch</u>		
Phone:	<u>(503) 988-4873</u>	Ext.:	<u>84873</u>
		I/O Address:	<u>503/4</u>
Presenter Name(s) & Title(s):	<u>N/A</u>		

General Information

1. What action are you requesting from the Board?

Information Technology is requesting Board approval of a budget modification authorizing the reclassification of one position.

2. Please provide sufficient background information for the Board and the public to understand this issue. Please note which Program Offer this action affects and how it impacts the results.

Information Technology (IT) requests Board approval of a reclassification request for the following position.

Position Title (Old)	Position Title (New)	Position Number	FTE
Development Analyst Sr	HR Manager 2	706626	No FTE Change

Information Technology requested the Central Class Compensation Unit to examine the duties of this position. The Central Class Compensation Unit approved the classification changes noted

**Budget Modification APR
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above. Position 706626 is budgeted for FY 2011 in cost center 709100 IT-HR.

3. Explain the fiscal impact (current year and ongoing)

The reclassification request is being accomplished within current resources for FY 2011. Ongoing expenses for this position will be recovered via standard service rates.

4. Explain any legal and/or policy issues involved.

The reclassifications, for which approval is sought in this request, have been reviewed by the Human Resources Division.

5. Explain any citizen and/or other government participation that has or will take place.

N/A

ATTACHMENT A

Budget Modification

If the request is a **Budget Modification**, please answer **all** of the following in detail:

- **What revenue is being changed and why? If the revenue is from a federal source, please list the Catalog of Federal Assistance Number (CFDA).**

N/A

- **What budgets are increased/decreased?**

N/A

- **What do the changes accomplish?**

Reclassification of one position.

- **Do any personnel actions result from this budget modification? Explain.**

- **If a grant, is 100% of the central and department indirect recovered? If not, please explain why.**

N/A

- **Is the revenue one-time-only in nature? Will the function be ongoing? What plans are in place to identify a sufficient ongoing funding stream?**

N/A

- **If a grant, what period does the grant cover? When the grant expires, what are funding plans? Are there any particular stipulations required by the grant (i.e. cash match, in kind match, reporting requirements etc)?**

N/A

NOTE: If a Budget Modification or a Contingency Request attach a Budget Modification Expense & Revenues Worksheet and/or a Budget Modification Personnel Worksheet.

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ATTACHMENT B

BUDGET MODIFICATION: NOND - 11

Required Signatures

**Elected Official or
Department/
Agency Director:**

Sherry Swackhamer
Sherry Swackhamer

Date: 1-10-11

Budget Analyst:

Julie Neburka
Julie Neburka

Date: 1-10-11

Department HR:

Date: _____

Countywide HR:

Date: _____

**Budget Modification APR
Submit to Board Clerk**

Budget Modification ID:

EXPENDITURES & REVENUES

Please show an increase in revenue as a negative value and a decrease as a positive value for consistency with SAP

Line No.	Fund Center	Fund Code	Program #	Func. Area	Accounting Unit			Cost Element	Current Amount	Revised Amount	Change Increase/ (Decrease)	Subtotal
					Internal Order	Cost Center	WBS Element					
1	10-10	3503		0020		709100		60000	176,537	176,537	0	
2	10-10	3503		0020		709100		60130	57,358	57,358	0	
3	10-10	3503		0020		709100		60140	39,161	39,161	0	
4										0		
5										0		
6	72-10	3500		0020		705210		50316		0	0	
7	72-10	3500		0020		705210		60330		0	0	
8										0		
9										0		
10										0		
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