



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

## ATTACHMENT B

**BUDGET MODIFICATION: LIB - 05**

### Required Signatures

<b>Elected Official or Department/ Agency Director:</b>	<u>Vailey Oehlke /s/</u>	<b>Date:</b> <u>2/16/12</u>
<b>Budget Analyst:</b>	_____	<b>Date:</b> _____
		2/16/12
<b>Budget Analyst:</b>	<u>Ching Hay /s/</u>	<b>Date:</b> _____
		2/16/12
<b>Department HR:</b>	<u>Shelly Kent /s/</u>	<b>Date:</b> _____
		2/16/12
<b>Countywide HR:</b>	<u>Joi Doi /s/</u>	<b>Date:</b> <u>Feb. 16, 2012</u>

Budget Modification ID: **BM-LIB-05**

### EXPENDITURES & REVENUES

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

Budget/Fiscal Year: 2012

Line No.	Fund Center	Fund Code	Program #	Func. Area	Internal Order	Accounting Unit		Cost Element	Current Amount	Revised Amount	Change Increase/ (Decrease)	Subtotal	Description
						Cost Center	WBS Element						
1	80-90	1510	80005	70		801100		60000	166,199	170,636	4,437		Permanent
2	80-90	1510	80005	70		801100		60130	50,197	51,559	1,362		Salary Related Expenses
3	80-90	1510	80005	70		801100		60140	53,091	53,424	333		Insurance Benefits
4	80-90	1510	80005	70		801100		60180	37,000	30,868	(6,132)	0	Printing
5										0			
6	72-10	3500		20		705210		50316			(333)		Insurance Revenue
7	72-10	3500		20		705210		60330			333		Offsetting Expenditure
8										0			
9										0			
10										0			
11										0			
12										0			
13										0			
14										0			
15										0			
16										0			
17										0			
18										0			
19										0			
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23										0			
24										0			
25										0			
26										0			
27										0			
28										0			
29										0			
											0	0	Total - Page 1
											0	0	GRAND TOTAL