



MULTNOMAH COUNTY AGENDA PLACEMENT REQUEST (revised 09/22/08)

APPROVED: MULTNOMAH COUNTY
BOARD OF COMMISSIONERS
AGENDA # R-8 DATE 01/07/2010
DEBORAH L. BOGSTAD, BOARD CLERK

Board Clerk Use Only

Meeting Date: 01/07/2010
Agenda Item #: R-8
Est. Start Time: 10:25 AM
Date Submitted: 12/22/09

BUDGET MODIFICATION: DCM-14 (FPM 10-04)

BUDGET MODIFICATION DCM-14 (FPM 10-04) Appropriating Funds from the City of Portland into Capital Fund 2507 for Expenses Incurred for
Agenda Requested Tenant Improvements to the Gate Residential Building for the City of
Title: Portland Gateway Center for Domestic Violence Services

Note: If Ordinance, Resolution, Order or Proclamation, provide exact title. For all other submissions, provide a clearly written title sufficient to describe the action requested.

Requested Meeting Date:	<u>January 7, 2010</u>	Amount of Time Needed:	<u>5 mins</u>
Department:	<u>County Management</u>	Division:	<u>FPM</u>
Contact(s):	<u>John Lindenthal, Brett Taute</u>		
Phone:	<u>503 988-4213</u>	Ext.	<u>84213</u>
		I/O Address:	<u>274/1</u>
Presenter(s):	<u>John Lindenthal</u>		

General Information

1. What action are you requesting from the Board?

To deposit \$600,000 from the City of Portland into Fund 2507 for the expenses incurred for the requested tenant improvements to the Gateway Residential building for the City of Portland Gateway Center for Domestic Violence Services.

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.

On October 22, the Board of County Commissioners approved a Lease and IGA with the City of Portland to use the Gateway Residential Building for the City of Portland Gateway Center for Domestic Violence Services. As part of that agreement, the City agreed to pay up to \$600,000 for requested tenant improvement to the facility for the program, section 5 of the lease agreement describes this agreement.

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

Fiscal Year FY10: Addition of \$600,000 to fund 2507 (held in reserve for the above referenced work).

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

Lease Agreement 30000944, attached

IGA 30000956, attached

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

City of Portland is scheduled to pay Multnomah County up to \$600,000 per the agreed to terms in section 5 of Lease Agreement 30000944.

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?**

Fund 2507 50236, IG Charges for Services is increased to reflect payments from the City of Portland.

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

Fund 2507 50236, IG Charges for Services is increased.

- **What do the changes accomplish?**

Allows for requested tenant improvement to the facility; section 5 of the lease agreement describes this agreement.

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

No.

- **How will the county indirect, central finance and human resources and departmental overhead costs be covered?**

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?**

Fiscal Year FY10: One time only Addition of up to \$600,000 through three \$200,000 payments from the City of Portland to fund 2507 (held in reserve for the above referenced work).

- **If a grant, what period does the grant cover?**

N/A

- **If a grant, when the grant expires, what are funding plans?**

N/A

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

ATTACHMENT B

BUDGET MODIFICATION: DCM-14 (FPM 10-04)

Required Signatures

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



Date: 12/22/09

Budget Analyst:



Date: 12/21/09

Department HR:

Date: _____

Countywide HR:

Date: _____

Budget Modification ID: **FPM10-04****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: 2010

Line No.	Fund Center	Fund Code	Program #	Func. Area	Accounting Unit			Cost Element	Current Amount	Revised Amount	Change Increase/ (Decrease)	Subtotal	Description
					Internal Order	Cost Center	WBS Element						
1										0			
2										0			
3										0			
4	72-50	2507					CP08.10.451	50236	0	(600,000)	(600,000)		IG Charges for Services
5										0			
6										0			
7										0			
8										0			
9										0			
10										0			
11										0			
12										0			
13										0			
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25										0			
26										0			
27										0			
28										0			
29										0			
											(600,000)	0	Total - Page 1
											(600,000)	0	GRAND TOTAL