



**WEBB COUNTY
REQUEST FOR BUDGET APPROPRIATION TRANSFER
OR SUPPLEMENTAL BUDGET**

INSTRUCTIONS:

ALL budget appropriation transfer and supplemental budget requests for grants and forfeitures require Auditor's Office pre-approval for court agenda. Please submit the signed form to the Auditor's Office for review along with copy of grant award, terms of award, proof of receipt of additional revenue and/or other backup to support this request for our review. Should pre-approval be granted, the Department will be notified and Auditor's Office will upload the signed form as part of the proposed agenda item. Agenda items will be between Auditor's Office sponsored by the Department requesting the budget amendment.

Requesting Department : Community Action Agency Date of Request: 07/29/2026

Request Type (check one):



Departmental Line Item Transfer
(Check if transfer within existing budget)



Supplemental Budget
(Check if new unbudgeted revenue / expenditure)

Transfer From / Supplemental Revenue:

Account Number	Account Name	Amount
2043-1160-521-422000	FICA County Share	\$150.00
2043-1160-521-441001	Telephone	\$5,631.00
2043-1160-521-443000-035	Repairs & Maintenance Equipment	\$2,196.00
2043-1160-521-443000-075	Repairs & Maintenance Vehicles	\$1,697.00
TOTAL		\$9,674.00

Transfer To / Supplemental Expenditure Accounts:

Account Number	Account Name	Amount
2043-1160-521-410000	Payroll Cost	\$1,185.00
2043-1160-521-421000	Health HSA Life Insurance	\$8,489.00
2043-1160-521-423000	Retirement County Share	\$7.00
2043-1160-521-425000	Unemployment Tax	\$36.00
2043-1160-521-426000	Worker Compensation	\$2.00
TOTAL		\$9,719.00

Justification for Request:

Approved by Department Signing Authority:

Guillermo Walls - Director

Print Name/Title

Signature

FOR AUDITOR'S USE ONLY

Recommended by County

Auditor's Office: _____

Date: _____

FOR BUDGET OFFICE USE ONLY

Commissioners Court Approval Date: _____

Date Entered by Budget Office: _____

Agenda
Item : _____

Initials: _____



**WEBB COUNTY
REQUEST FOR BUDGET APPROPRIATION TRANSFER
OR SUPPLEMENTAL BUDGET**

INSTRUCTIONS:

ALL budget appropriation transfer and supplemental budget requests for grants and forfeitures require Auditor's Office pre-approval for court agenda. Please submit the signed form to the Auditor's Office for review along with copy of grant award, terms of award, proof of receipt of additional revenue and/or other backup to support this request for our review. Should pre-approval be granted, the Department will be notified and Auditor's Office will upload the signed form as part of the proposed agenda item. Agenda items will be between Auditor's Office sponsored by the Department requesting the budget amendment.

Requesting Department : Community Action Agency

Date of Request: 07/29/2026

Request Type (check one):



Departmental Line Item Transfer
(Check if transfer within existing budget)



Supplemental Budget
(Check if new unbudgeted revenue / expenditure)

Transfer From / Supplemental Revenue:

Account Number	Account Name	Amount
2043-1160-521-443000-075	Repairs & Maintenance Vehicles	\$610.00
2043-1160-521-443000-110	Repairs & Maintenance Software	\$1,000.00
2043-1160-521-456005	Postage & Courier Service	\$1,272.00
2043-1160-521-456205	Training & Education	\$6,405.00
2043-1160-521-456224	Meetings & Conferences	\$1,445.00
2043-1160-521-458000	Administrative Travel	\$2,028.00
2043-1160-521-458060	In Town Mileage	\$400.00
2043-1160-521-460028	Janitorial Supplies	\$466.00
TOTAL		\$13,626.00

Transfer To / Supplemental Expenditure Accounts:

Account Number	Account Name	Amount
2043-1160-521-454000	Advertising	\$628.00
2043-1160-521-460000	Office Supplies	\$3,594.00
2043-1160-521-460105	Minor Tools & Apparatus	\$4,968.00
2043-1160-521-461000	Materials & Supplies	\$4,436.00
TOTAL		\$13,626.00

Justification for Request:

Approved by Department Signing Authority:

Guillermo Walls - Director

Print Name/Title

Signature

FOR AUDITOR'S USE ONLY

Recommended by County

Auditor's Office: _____

Date: _____

FOR BUDGET OFFICE USE ONLY

Commissioners Court Approval Date: _____

Date Entered by Budget Office: _____

Agenda
Item : _____

Initials: _____



**WEBB COUNTY
REQUEST FOR BUDGET APPROPRIATION TRANSFER
OR SUPPLEMENTAL BUDGET**

INSTRUCTIONS:

ALL budget appropriation transfer and supplemental budget requests for grants and forfeitures require Auditor's Office pre-approval for court agenda. Please submit the signed form to the Auditor's Office for review along with copy of grant award, terms of award, proof of receipt of additional revenue and/or other backup to support this request for our review. Should pre-approval be granted, the Department will be notified and Auditor's Office will upload the signed form as part of the proposed agenda item. Agenda items will be between Auditor's Office sponsored by the Department requesting the budget amendment.

Requesting Department : Community Action Agency

Date of Request: 07/29/2026

Request Type (check one):



Departmental Line Item Transfer
(Check if transfer within existing budget)



Supplemental Budget
(Check if new unbudgeted revenue / expenditure)

Transfer From / Supplemental Revenue:

Account Number	Account Name	Amount
2043-1160-521-462605	Fuel & Lubricants	\$2,383.00
2043-1160-521-464010	Dues & Memberships	\$330.00
TOTAL		\$2,713.00

Transfer To / Supplemental Expenditure Accounts:

Account Number	Account Name	Amount
2043-1160-521-461000	Materials & Supplies	\$2,713.00
TOTAL		\$2,713.00

Justification for Request:

Approved by Department Signing Authority:

Print Name/Title



Signature

FOR AUDITOR'S USE ONLY

Recommended by County
Auditor's Office: _____

Date: _____

FOR BUDGET OFFICE USE ONLY

Commissioners Court Approval Date: _____
Date Entered by Budget Office: _____

Agenda
Item : _____
Initials: _____