

ORDINANCE 2025 - 39

**AN ORDINANCE TRANSFERRING APPROPRIATIONS WITHIN THE
2025 BUDGET OF THE MVH FUND AND THE GENERAL FUND: SANITATION AND
RECYCLING DEPARTMENTS
IN THE CITY OF HOBART, LAKE COUNTY, INDIANA.**

WHEREAS, it has been determined it is now necessary to appropriate more money than was appropriated in the annual budgets in certain line items in the MVH FUND AND THE GENERAL FUND: SANITATION AND RECYCLING DEPARTMENTS in the 2025 budget; and

WHEREAS, it has been shown that certain existing appropriations now have unobligated balances that are not currently needed and eligible for use to cover certain expenses for the purposes for which they were appropriated in the MVH FUND AND THE GENERAL FUND: SANITATION AND RECYCLING DEPARTMENTS in the 2025 budget;

NOW, THEREFORE, BE IT ORDAINED by the Common Council of the City of Hobart, Lake County Indiana that:

Section 1(a). For the expenses of the taxing unit, the following additional sums of money are hereby appropriated out of the **MVH Fund** for the purposes specified, subject to the laws governing the same:

<u>Account</u>	<u>Description</u>	<u>Amount Requested</u>	<u>Amount Appropriated</u>
2201090362.000	Maintenance	\$ 2,000.00	\$ 2,000.00
2201090363.000	Contractual	\$ 7,000.00	\$ 7,000.00
Total MVH Fund Additional Appropriations: \$ 9,000.00			

Section 1(b). The following existing appropriation(s) in the **MVH Fund** be reduced in the following amount:

<u>Account</u>	<u>Description</u>	<u>Amount Requested</u>	<u>Amount Reduced</u>
2201090235.001	Materials & Supplies	\$ 2,000.00	\$ 2,000.00
2201090221.000	Gasoline	\$ 7,000.00	\$ 7,000.00
Total MVH Fund Reductions: \$ 9,000.00			

Section 2(a). For the expenses of the taxing unit, the following additional sums of money are hereby appropriated out of the **General Fund: Sanitation Department** for the purposes specified, subject to the laws governing the same:

<u>Account</u>	<u>Description</u>	<u>Amount Requested</u>	<u>Amount Appropriated</u>
1101041121.002	Sanitation Driver	\$ 10,000.00	\$ 10,000.00
Total General Fund: Sanitation Department Additional Appropriations: \$ 10,000.00			

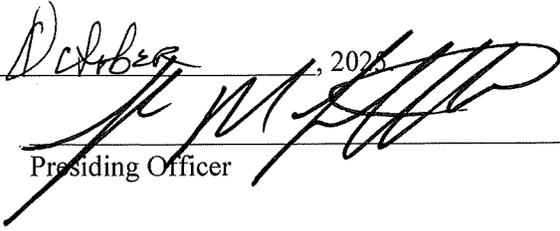
Section 2(b). The following existing appropriation(s) in the **General Fund: Recycling Department** be reduced in the following amount:

<u>Account</u>	<u>Description</u>	<u>Amount Requested</u>	<u>Amount Reduced</u>
1101043121.002	Recycling Driver	\$ 10,000.00	\$ 10,000.00
Total General Fund: Recycling Department Reductions: \$ 10,000.00			

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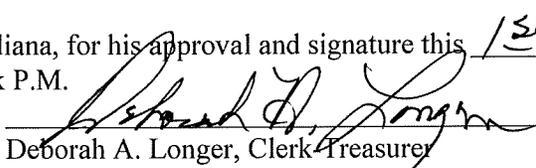
PASSED and ADOPTED this 1st day of October, 2025

ATTEST: 
Deborah A. Longer, Clerk-Treasurer

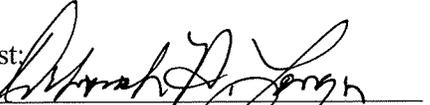

Presiding Officer

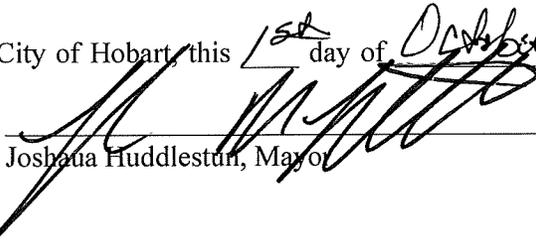
Presented by me to the Mayor of the City of Hobart, Indiana, for his approval and signature this 1st day of October 2025 at 7:45 o'clock P.M.


Deborah A. Longer, Clerk-Treasurer


Joshua Huddleston, Mayor

APPROVED and SIGNED by me, the Mayor of the City of Hobart, this 1st day of October, 2025.

Attest: 
Deborah A. Longer, Clerk-Treasurer


Joshua Huddleston, Mayor

MEMORANDUM

Date: Sept. 18, 2025

To: Clerk-Treasurer's Office

From: MVH - Public Works
(Department/Department Head)

Re: TRANSFER OF FUNDS

Handwritten: Dept 2025-109

Please transfer the following amounts within my department's budget to cover necessary expenses:

SUPPLIES: (200 Series)

<u>REDUCE</u>	<u>AMOUNT</u>	<u>INCREASE</u>
Description: <u>Material / Supplies</u>		Description: _____
Line #: <u>2201090 235.001</u>	<u>\$2,000.00</u>	Line #: _____
Description: _____		Description: _____
Line #: _____		Line #: _____

SERVICES HIRED: (300 Series)

<u>REDUCE</u>	<u>AMOUNT</u>	<u>INCREASE</u>
Description: _____		Description: <u>Maintenance</u>
Line #: _____	<u>\$2,000.00</u>	Line #: <u>2201090 362.000</u>
Description: _____		Description: _____
Line #: _____		Line #: _____

CAPITAL OUTLAYS: (400 Series)

<u>REDUCE</u>	<u>AMOUNT</u>	<u>INCREASE</u>
Description: _____		Description: _____
Line #: _____		Line #: _____
Description: _____		Description: _____
Line #: _____		Line #: _____

Handwritten Signature:

Signature of Department Head

MEMORANDUM

Date: 9/18/25

To: Clerk-Treasurer's Office

From: MVH
(Department/Department Head)

Re: TRANSFER OF FUNDS

ORD 2025-39

Please transfer the following amounts within my department's budget to cover necessary expenses:

SUPPLIES: (200 Series)

<u>REDUCE</u>	<u>AMOUNT</u>
Description: <u>Gasoline</u>	
Line #: <u>2261090221.000</u>	<u>\$7,000</u>
Description: _____	
Line #: _____	

<u>INCREASE</u>
Description: <u>Contractual</u>
Line #: <u>2201090363.000</u>
Description: _____
Line #: _____

SERVICES HIRED: (300 Series)

<u>REDUCE</u>	<u>AMOUNT</u>
Description: _____	
Line #: _____	
Description: _____	
Line #: _____	

<u>INCREASE</u>
Description: _____
Line #: _____
Description: _____
Line #: _____

CAPITAL OUTLAYS: (400 Series)

<u>REDUCE</u>	<u>AMOUNT</u>
Description: _____	
Line #: _____	
Description: _____	
Line #: _____	

<u>INCREASE</u>
Description: _____
Line #: _____
Description: _____
Line #: _____

[Signature]
Signature of Department Head

For Office Use Only: Department# _____ Transfers made as Requested on _____ by: _____
(Date) (Initials)

MEMORANDUM

Date: 9/23/25

To: Clerk-Treasurer's Office

From: Sanitation
(Department/Department Head)

*ORD
2025-39
San. 2(A+B)*

Re: TRANSFER OF FUNDS

Please transfer the following amounts within my department's budget to cover necessary expenses:

Personnel 100

~~SUPPLIES~~: (200 Series)

<u>REDUCE</u>	<u>AMOUNT</u>	<u>INCREASE</u>
Description: <u>Recycling Driver</u>		Description: <u>Sanitation Driver</u>
Line #: <u>1101043121.002</u>	<u>\$10,000.00</u>	Line #: <u>1101041121.002</u>
Description: _____		Description: _____
Line #: _____		Line #: _____

SERVICES HIRED: (300 Series)

<u>REDUCE</u>	<u>AMOUNT</u>	<u>INCREASE</u>
Description: _____		Description: _____
Line #: _____		Line #: _____
Description: _____		Description: _____
Line #: _____		Line #: _____

CAPITAL OUTLAYS: (400 Series)

<u>REDUCE</u>	<u>AMOUNT</u>	<u>INCREASE</u>
Description: _____		Description: _____
Line #: _____		Line #: _____
Description: _____		Description: _____
Line #: _____		Line #: _____

Kent R. Moore
Signature of Department Head

For Office Use Only: Department# _____ Transfers made as Requested on _____ by: _____
(Date) (Initials)
Clerical/Forms/Transfer of Funds