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ORDINANCE 2017-22

**AN ORDINANCE TRANSFERRING APPROPRIATIONS
WITHIN THE 2017 BUDGET OF THE
GENERAL FUND: BUILDING DEPARTMENT and BOARD OF WORKS;
THE MARIA REINER CENTER FUND; and THE PARK AND RECREATION FUND
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 budget in certain line items in the General Fund: Building Department and Board of Works (Fund 101), the Maria Reiner Center Fund (Fund 255) and the Park & Recreation Fund (Fund 204) in the 2017 budget; and

WHEREAS, it has been shown that certain existing appropriations now have unobligated balances that are not currently needed for the purposes for which appropriated in the General Fund: Building Department and Board of Works (Fund 101), the Maria Reiner Center Fund (Fund 255) and the Park & Recreation Fund (Fund 204) in the 2017 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 **General Fund: Building 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>
101037235.001	Materials & Supplies	\$ 117.36	\$ 117.36
Total General Fund: Building Department Additional Appropriations: \$ 117.36			

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

<u>Account</u>	<u>Description</u>	<u>Amount Requested</u>	<u>Amount Reduced</u>
101037331.000	Printing	\$ 117.36	\$ 117.36
Total General Fund: Building Department Reductions: \$ 117.36			

Section 2(a). For the expenses of the taxing unit, the following additional sums of money are hereby appropriated out of the **Maria Reiner Center 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>
255090450.000	Equipment	\$ 6,000.00	\$ 6,000.00
Total Maria Reiner Center Fund Additional Appropriations: \$6,000.00			

Section 2(b). The following existing appropriation(s) in the **Maria Reiner Center Fund** be reduced in the following amount:

<u>Account</u>	<u>Description</u>	<u>Amount Requested</u>	<u>Amount Reduced</u>
255090235.001	Materials and Supplies	\$ 6,000.00	\$ 6,000.00
Total Maria Reiner Center Fund Reductions: \$6,000.00			

50 **Section 3(a).** For the expenses of the taxing unit, the following additional sums of money are hereby
 51 appropriated out of the **Park & Recreation Fund** for the purposes specified, subject to the laws governing
 52 the same:

<u>Account</u>	<u>Description</u>	<u>Amount Requested</u>	<u>Amount Appropriated</u>
204090113.000	Part Time Employees	\$ 6,000.00	\$ 6,000.00
204090131.003	Social Security	2,000.00	2,000.00
204090131.004	Medicare	1,000.00	1,000.00
Total Park & Recreation Fund Additional Appropriations: \$ 9,000.00			

59 **Section 3(b).** The following existing appropriation(s) in the **Park & Recreation Fund** be reduced in the
 60 following amount:

<u>Account</u>	<u>Description</u>	<u>Amount Requested</u>	<u>Amount Reduced</u>
204090221.000	Gasoline	\$ 2,000.00	\$ 2,000.00
204090224.000	Pool Supplies	750.00	750.00
204090224.002	Internet	1,000.00	1,000.00
204090331.000	Printing	1,000.00	1,000.00
204090372.000	Lease Rentals	1,250.00	1,250.00
204090450.000	Equipment	3,000.00	3,000.00
Total Park & Recreation Fund Reductions: \$ 9,000.00			

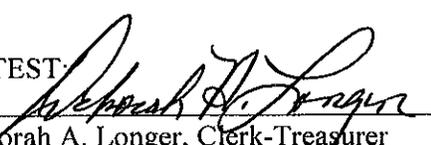
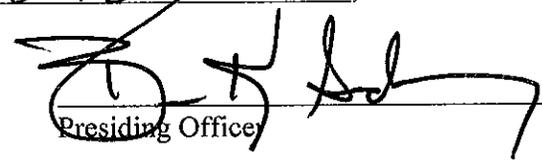
71 **Section 4(a).** For the expenses of the taxing unit, the following additional sums of money are hereby
 72 appropriated out of the **General Fund: Board of Works Department** for the purposes specified, subject to
 73 the laws governing the same:

<u>Account</u>	<u>Description</u>	<u>Amount Requested</u>	<u>Amount Appropriated</u>
101038340.005	P&C Insurance Claims	\$ 50,000.00	\$ 50,000.00
Total General Fund: Board of Works Department Additional Appropriations: \$50,000.00			

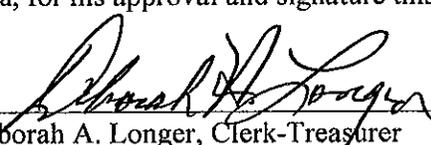
78 **Section 4(b).** The following existing appropriation(s) in the **General Fund: Board of Works**
 79 **Department** be reduced in the following amount:

<u>Account</u>	<u>Description</u>	<u>Amount Requested</u>	<u>Amount Reduced</u>
101038235.001	Materials & Supplies	\$ 50,000.00	\$ 50,000.00
Total General Fund: Board of Works Department Reductions: \$50,000.00			

86 PASSED and ADOPTED this 18th day of October, 2017.

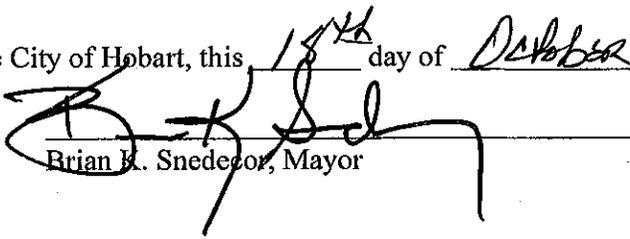
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 90 ATTEST: 
 91 Deborah A. Longer, Clerk-Treasurer
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 94 Presiding Officer

94 Presented by me to the Mayor of the City of Hobart, Indiana, for his approval and signature this 18th
 95 day of October, 2017 at 7:20 o'clock P.M.

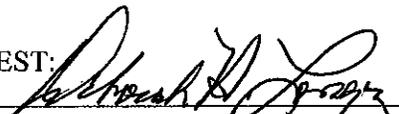
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 98 Deborah A. Longer, Clerk-Treasurer
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APPROVED and SIGNED by me, the Mayor of the City of Hobart, this 18th day of October, 2017.



Brian K. Snedcor, Mayor

ATTEST: 

Deborah A. Longer, Clerk-Treasurer

MEMORANDUM

Date: SEPT. 19, 2017

To: Clerk-Treasurer's Office

From: BUILDING
(Department/Department Head)

Re: **TRANSFER OF FUNDS**

ORD 2017-28
Justice 1A+D

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

SUPPLIES: (200 Series)

REDUCE

AMOUNT

INCREASE

Description: PRINTING

Line #: 101037331.000

117.36

Description: MATERIALS & SUPPLIES

Line #: 101037235.001

Description: X

Line #: X

Description: X

Line #: X

SERVICES HIRED: (300 Series)

REDUCE

AMOUNT

INCREASE

Description: X

Line #: X

CAPITAL OUTLAYS: (400 Series)

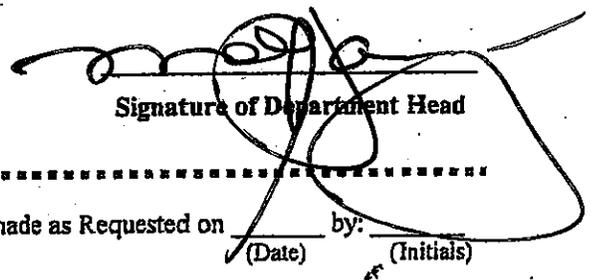
REDUCE

AMOUNT

INCREASE

Description: X

Line #: X


Signature of Department Head

For Office Use Only: Department# _____

Transfers made as Requested on _____ by: _____
(Date) (Initials)

MEMORANDUM

Date: 9-28-17

To: **Clerk-Treasurer's Office**

From: MRC
(Department/Department Head)

Re: **TRANSFER OF FUNDS**

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

SUPPLIES: (200 Series)

REDUCE

AMOUNT

INCREASE

Description: _____

Line #: _____

SERVICES HIRED: (300 Series)

REDUCE

AMOUNT

INCREASE

Description: _____

Line #: _____

CAPITAL OUTLAYS: (400 Series)

REDUCE

AMOUNT

INCREASE

Description: Materials & Supplies

Line #: 255090235.001

Description: _____

Line #: _____

\$6000.00

Description: Equipment

Line #: 255090450.000

Description: _____

Line #: _____

Amie Schaller

Signature of Department Head

For Office Use Only: Department# _____

Transfers made as Requested on _____ by: _____

(Date) (Initials)

RECEIVED

SEP 28 2017

CITY OF HOBART
Clerk-Treasurer Office

*DRD
2017-22
22
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22*



MEMORANDUM

Date: 10-6-17

To: Clerk-Treasurer's Office

From: Parks & Mitchell
(Department/Department Head)

Re: **TRANSFER OF FUNDS**

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

*ORD 2017-
Section
M P + B*

SUPPLIES: (200 Series)

REDUCE

AMOUNT

INCREASE

Description: Gasoline
Line #: 204090221.000

\$2000.00

Description: Part-time \$6,000.00
Line #: 204090113.000

Description: Pool Supplies
Line #: 204090224.000

\$750.00

Description: _____
Line #: _____

SERVICES HIRED: (300 Series)

REDUCE

AMOUNT

INCREASE

Description: Internet
Line #: 204090324.000

\$1000.00

Description: _____
Line #: _____

Description: Printing
Line #: 204090331.000

\$1000.00

Description: _____
Line #: _____

Description: Postal
Line #: 204090372.000

\$1250.00

CAPITAL OUTLAYS: (400 Series)

REDUCE

AMOUNT

INCREASE

Description: _____
Line #: _____

J Mitchell
Signature of Department Head

.....

MEMORANDUM

Date: 10-6-17

To: **Clerk-Treasurer's Office**

From: Parks J. Mitchell
(Department/Department Head)

Re: **TRANSFER OF FUNDS**

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

*Ord 2017-22
Section 3A+b*

SUPPLIES: (200 Series)

REDUCE

AMOUNT

INCREASE

Description: _____

Line #: _____

Description: Social Security \$2000.00

Line #: 204090131.003

Description: _____

Line #: _____

Description: Medicare \$1000.00

Line #: 204090131.004

SERVICES HIRED: (300 Series)

REDUCE

AMOUNT

INCREASE

Description: _____

Line #: _____

CAPITAL OUTLAYS: (400 Series)

REDUCE

AMOUNT

INCREASE

Description: Equipment

Line #: 204090450.000

\$3000.00

Description: _____

Line #: _____

Description: _____

Line #: _____

Description: _____

Line #: _____

J. Mitchell
Signature of Department Head

MEMORANDUM

Date: 9/28/17

To: **Clerk-Treasurer's Office**

From: Bd of Wks
(Department/Department Head)

Re: **TRANSFER OF FUNDS**

ORD. 2017-22
Section 4A+B

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

SUPPLIES: (200 Series)

REDUCE

AMOUNT

INCREASE

Description: MAT + SUPPLIES

Line #: 1010 38 235.001

\$ 50,000.-

Description: _____

Line #: _____

Description: _____

Line #: _____

Description: _____

Line #: _____

SERVICES HIRED: (300 Series)

REDUCE

AMOUNT

INCREASE

Description: _____

Line #: _____

\$ 50,000.-

Description: Pr C Ips Claims Pd.

Line #: 1010 38 340.005

Description: _____

Line #: _____

Description: _____

Line #: _____

CAPITAL OUTLAYS: (400 Series)

REDUCE

AMOUNT

INCREASE

Description: _____

Line #: _____

JAL C.F.

Signature of Department Head