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**ORDINANCE 2019-25**

**AN ORDINANCE TRANSFERRING APPROPRIATIONS WITHIN THE 2019 BUDGET  
OF THE MARIA REINER SENIOR CENTER FUND and  
THE GENERAL FUND, BOARD OF WORKS DEPARTMENT  
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 Maria Reiner Senior Center Fund and the General Fund, Board of Works Department in the 2019 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 Maria Reiner Senior Center Fund and the General Fund, Board of Works Department in the 2019 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 **Maria Reiner Senior 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>
255090397.002	Promotion of the Department	\$ 1,000.00	\$ 1,000.00
<b>Total Maria Reiner Senior Center Fund Additional Appropriations: \$1,000.00</b>			

**Section 1(b).** The following existing appropriation(s) in the **Maria Reiner Senior 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 & Supplies	\$1,000.00	\$1,000.00
<b>Total Maria Reiner Senior Center Fund Reductions: \$1,000.00</b>			

**Section 2(a).** For the expenses of the taxing unit, the following additional sums of money are hereby appropriated out of the **General Fund Board of Works 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>
101038340.005	Property & Casualty Claims Paid	\$138,722.64	\$138,722.64
<b>Total General Fund Board of Works Department Additional Appropriations: \$138,722.64</b>			

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

<u>Account</u>	<u>Description</u>	<u>Amount Requested</u>	<u>Amount Reduced</u>
101038430.000	Improvements	\$94,750.00	\$94,750.00
101038450.000	Equipment	\$43,972.64	\$43,972.64
<b>Total General Fund Board of Works Department Reductions: \$138,722.64</b>			

**PASSED and ADOPTED** this 21<sup>st</sup> day of August, 2019.

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ATTEST

Deborah A. Longer  
Deborah A. Longer, Clerk-Treasurer

Brian K. Snedecor  
Presiding Officer

Presented by me to the Mayor of the City of Hobart, Indiana, for his approval and signature this 21<sup>st</sup>  
day of August, 2019 at 7:15 o'clock P.M.

Deborah A. Longer  
Deborah A. Longer, Clerk-Treasurer

APPROVED and SIGNED by me, the Mayor of the City of Hobart, this 21<sup>st</sup> day of August  
2019.

Attest: Deborah A. Longer  
Deborah A. Longer, Clerk-Treasurer

Brian K. Snedecor  
Brian K. Snedecor, Mayor

MEMORANDUM

Date: 8/9/19

To: Clerk-Treasurer's Office

From: Aimee Schallerkamp  
(Department/Department Head)

ORD. 2019-25  
1(a+b)

Re: TRANSFER OF FUNDS

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: _____		Description: _____
Line #: _____		Line #: _____
Description: _____		Description: _____
Line #: _____		Line #: _____

SERVICES HIRED: (300 Series)

<u>REDUCE</u>	<u>AMOUNT</u>	<u>INCREASE</u>
Description: <u>Materials &amp; Supplies</u>		Description: <u>Promotion of the Dept.</u>
Line #: <u>255090235.001</u>	<u>\$1000</u>	Line #: <u>255090397.002</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 #: _____

Aimee Schallerkamp  
Signature of Department Head

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

MEMORANDUM

Date: 8/6/19

To: Clerk-Treasurer's Office

From: Bd of Wks.  
(Department/Department Head)

ORD 2019-25  
2(A+B)

Re: TRANSFER OF FUNDS

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: _____		Description: _____
Line #: _____		Line #: _____
Description: _____		Description: _____
Line #: _____		Line #: _____

SERVICES HIRED: (300 Series)

<u>REDUCE</u>	<u>AMOUNT</u>	<u>INCREASE</u>
Description: <u>IMPROVEMENTS</u> # <u>94750</u>		Description: <u>P+C Claims Pd.</u>
Line #: <u>101038430.000</u>	<u>138,722.64</u>	Line #: <u>101038340.005</u>
Description: <u>EQUIPMENT</u>		Description: _____
Line #: <u>101038450.000</u>	<u>43,972.64</u>	Line #: _____

CAPITAL OUTLAYS: (400 Series)

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

[Signature]  
Signature of Department Head

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