



Legislation Details (With Text)

File #: 19-0095 **Version:** 1 **Name:** A Resolution Approving the increase of funds to the Small Tools Account # 205-2010-6053 from the Jail Corrections Fund in the amount of \$2,514.72.
A Resolution Approving the increase of funds to the Small Tools Account # 205-2010-6053 from the Jail Corre
Type: Resolution **Status:** Adopted
File created: 2/11/2019 **In control:**
On agenda: 3/4/2019 **Final action:** 3/4/2019
Title: A Resolution Approving the increase of funds to the Small Tools Account # 205-2010-6053 from the Jail Corrections Fund in the amount of \$2,514.72.

Sponsors:**Indexes:****Code sections:**

Attachments: 1. Mobile Restraint Chair funds request, 2. Restricted jail corrections funds money transfer approval

Date	Ver.	Action By	Action	Result
3/4/2019	1	City Council	adopted	Pass

A Resolution Approving the increase of funds to the Small Tools Account # 205-2010-6053 from the Jail Corrections Fund in the amount of \$2,514.72.

A Resolution Approving the increase of funds to the Small Tools Account # 205-2010-6053 from the Jail Corrections Fund in the amount of \$2,514.72.

Request to use funds to purchase SPAR (Supplemental Prisoner Adjustable Restraint) Chair also known as a Mobile Restraint Chair.

Budgetary Impact:**Non-Capital Item:**

___ Budgeted under account # _____ (discussion item)

___ Not budgeted, requesting transfer of \$ _____ from Account # _____ to Account # _____.**Request to Transfer Departmental Budget Dollars form must be attached**

☒ Not budgeted requiring increase to account # 205-2010-6053 in the amount of \$2,514.72.**Request to Increase Departmental Budget Dollars form must be attached** (ATTACHED WITH EMAIL APPROVALS)

Capital - Departmental **Capital Purchase Worksheet form must be attached**

___ Budgeted under account # _____ for \$ _____ and described in budget as _____. Additional amount needed, if any: Increase in budget of \$ _____ OR, transfer of \$ _____ from Account # _____ to Account # _____.**Request to Increase OR Request to Transfer Departmental Budget Dollars form must be attached**

___ Not Budgeted - account # _____ requires budget increase of \$ _____.**Request to Increase Departmental Budget Dollars form must be attached**

Capital Project - **If requesting to start a project, a Capital Project Worksheet form must be attached**

In current year Capital Projects Plan:

____ Yes, described as _____, planned amount \$_____, requesting \$_____ as total project estimate, including contingencies, under account #_____

____ No, requesting \$_____ as total project estimate, including contingencies, under account #_____.

____ No, requesting an increase of \$_____ to an already approved project titled _____ that is being tracked under Account No. _____.

WHEREAS, A Resolution Approving the increase of funds to the Small Tools Account # 205-2010-6053 from the Jail Corrections Fund in the amount of \$2,514.72.

WHEREAS, Request to use funds to purchase SPAR (Supplemental Prisoner Adjustable Restraint) Chair also known as a Mobile Restraint Chair.

NOW THEREFORE BE IT RESOLVED that the City Council of the City of Foley, Alabama, as follows:

SECTION 1: Approves a Resolution to increase of funds to the Small Tools Account # 205-2010-6053 from the Jail Corrections Fund in the amount of \$2,514.72.

SECTION 2: Request to use funds to purchase SPAR (Supplemental Prisoner Adjustable Restraint) Chair also known as a Mobile Restraint Chair.

SECTION 3: This Resolution shall become effective immediately upon its adoption as required by law.