

Sedgwick County Budget Form Sedgwick County Grants and Other Funding, New Fund Centers/Cost Center/Internal Orders

Legistar # BoCC Approval Date Manager Approval Date	
N/A	Participating Community Mental Health Center Funding Source Funding Source
Grant Renewal: Previous IO#Grant Period From mm/dd/yyyyVarious7/1/2007 to6/30/	Type of Funding (check appropriate box by clicking) Federal Grant Federal/Pass-Thru State Other
Section 2: SAP (ECC) Set up information	
Funds Center # Department/Division Shopper(s) 4	Approver(s) PPS Workflow Structure Theresa Rhodes Brenda Guteirrez-Varela
Internal Order/Cost Center # Sub- Department Various Various	Talaya Schwartz Kathy Wegner Tracy Lolley
Functional Area # Program Grouping 401 N/A	
Section 3: Financial Information for Accounting For Internal Order Period Commitment Item entries must be by the specific number and description for Accounting to establish the	new internal order
REVENUE: Commitment Item Number and Description 33350 - STATE REVENUE-AGING \$158,499	2nd Amenment to Contract
Total 158,4	199
EXPENDITURE: Commitment Item Number and Description Internal Order Amount	Special Notes for Accounting Various g/1 #'s

	n for Budget (Revenues Must Use amount of change to the County Fisca			r)
REVENUE: Commitment Item Number		Current Year Adjustment	Next Year Adjustment	Special Notes for Budget
33350 - STATE REVENUE-AGING		\$158,499.00		nis is an amendment to current contra
m . I		170 400		
Total	and a seed Donner of the	158,499	- N	Carriel Nava Car Daday
EXPENDITURE: Commitment Item No 41000 Personnel	umber and Description	Current Year Adjustment	Next Year Adjustment	Special Notes for Budget
42000 Contractuals 44000 Debt Service		158,499		nis is an amendment to current contra
45000 Commodities 46000 Capital Improvements				
47000 Capital Equipment				
48000 Transfers Out Total		158,499		
Section 5: Position Manage	ement	100,477		
Departments are responsible for ensu	uring positions are 100% funded when ssion of accompanying Personnel Acti			
Position Number various positions across	Name	FTE % Funding	Effective Dates	Other Fund Center(s) If Not 100%
Fund Center 252				

ition Number	Name	FTE % Funding	Effective Dates