

# Budget Revision Request

**BJE 2007044**

Budget Journal Entry #

Gov. Code Sec. 29125 & 29130

**JE**

Related Journal Entry #

**Subject / Title:** Provide a **short description** for this budget revision request. For example: "Designate funds for zoning ordinance amendments" or "Distribute proceeds from sale of 2005 COPS".

Sheriff: Recognize \$382,980 in grant revenue from the California Department of Corrections & Rehabilitation (CDCR) for a parolee re-entry program. Appropriate \$382,980 in expense for contractors to provide services to parolees.

**Justification:** For all changes: explain what the change is for and why it is needed. Attach additional justification, board Letters or spreadsheet, if appropriate. When moving Appropriation: explain why it's available. When Revenue is adjusted: explain the reason for the increase or decrease. For adjustments to General Fund Contingency: explain why no other alternative funding source is available.

The CDCR awarded the Santa Barbara County Sheriff a multi-year grant totaling \$652,980 to provide re-entry services to parolees. A contract with Good Samaritan Services has been created to provide the services. This BRR recognizes \$382,980 in grant revenue for FY2007-08 and a corresponding expenditure for contractual services.

## Financial Summary

Increase or (Decrease) in Appropriation for / Uses:	Department / Fund <b>032 / 0001</b>	Department / Fund /	Department / Fund /	Department / Fund /
Salaries & Benefits	00	00	00	00
Services & Supplies	382,980   00	00	00	00
Other Charges	00	00	00	00
Fixed Assets	00	00	00	00
Other Financing Uses	00	00	00	00
Intrafund Transfers	00	00	00	00
Reserve or Designation	00	00	00	00
<b>Sources:</b>				
Revenue	382,980   00	00	00	00
Other Financing Sources	00	00	00	00
Intrafund Transfers	00	00	00	00
Reserve or Designation	00	00	00	00
Effect on Contingency / RE	-   00	00	00	00

Departmental Authorization	Auditor-Controller	CEO's Recommendation	Board of Supervisor's Action
_____ Department Head      Date	Budget Journal Entry and Related Journal Entry <i>if applicable</i> Approved as to Accounting Form.  _____ Auditor-Controller	<input type="checkbox"/> Approve  <input type="checkbox"/> Disapprove      _____ Date	<input type="checkbox"/> Approved  <input type="checkbox"/> Disapproved      _____ Date  _____ Agenda Item
_____ Department Head      Date		Transfer/Revision in Accordance with Board Policy dated 8/3/93.	_____ Clerk of the Board of Supervisors
_____ Department Head      Date		_____ County Executive Officer	