

Supplemental Budget Request

Status: Pending

Sheriff

Emergency Management

Suppl ID # 3553

Fund 167

Cost Center

Originator: M Caldwell/T Helms

Year 1 2021

Add'l FTE ☐

Priority 1

Name of Request: 2021 Emergency Flood Response

X

Department Head Signature (Required on Hard Copy Submission)

Date

| | | | |
|--------|----------------------|---------------------------|-------------------------|
| Costs: | Object | Object Description | Amount Requested |
| | 6610 | Contractual Services | \$250,000 |
| | 8301 | Operating Transfer In | (\$250,000) |
| | Request Total | | \$0 |

1a. Description of request:

Emergency Flood Event response

1b. Primary customers:

Whatcom County citizens

2. Problem to be solved:

There is a current emergency flood event impacting citizens throughout Whatcom County. Funding is needed to enact emergency response in a timely manner.

3a. Options / Advantages:

n/a

3b. Cost savings:

n/a

4a. Outcomes:

Provide emergency response as needed to help citizens impacted by the flood.

4b. Measures:

5a. Other Departments/Agencies:

5b. Name the person in charge of implementation and what they are responsible for:

6. Funding Source:

General Fund

Supplemental Budget Request

Status: Pending

Non-Departmental

Suppl ID # 3554

Fund 1

Cost Center 4530

Originator: M Caldwell

Year 1 2021

Add'l FTE ☐

Priority 1

Name of Request: Companion to Flood Response Request

X

Department Head Signature (Required on Hard Copy Submission)

Date

| | | | |
|--------|----------------------|---------------------------|-------------------------|
| Costs: | Object | Object Description | Amount Requested |
| | 8351.16700 | Operating Transfer Out | \$250,000 |
| | Request Total | | \$250,000 |

1a. Description of request:

Companion supplemental to #3553 to fund emergency flood response request. Provides funding to Sheriff - Emergency Management Division for appropriate emergency flood response costs.

1b. Primary customers:

2. Problem to be solved:

3a. Options / Advantages:

3b. Cost savings:

4a. Outcomes:

4b. Measures:

5a. Other Departments/Agencies:

5b. Name the person in charge of implementation and what they are responsible for:

6. Funding Source: