NOV 2 1 2022

## CITY CLERK

## **APPROPRIATION NO. 27, 2022**

AN ORDINANCE TO APPROPRIATE AN ADDITIONAL SUM OF MONEY FOR EXPENSES INCURRED DURING THE YEAR 2022.

WHEREAS, it has been determined that it is now necessary to appropriate more money than was appropriated in the annual budget; now, therefore:

BE IT ORDAINED by the Common Council of the City of Terre Haute, Vigo County, Indiana, that for the expenses of said municipal corporation the following additional sum of money is hereby appropriated and ordered set apart out of the fund herein named and for the purposes herein specified, subject to the laws governing the same:

		AMOUNT REQUESTED	AMOUNT APPROPRIATED					
FROM:	EMS N/R #0270-0027	\$149,000.00	\$149,000.00					
TO:	Gasoline (EMS N/R) #0270-0027-02-422010	\$ 9,000.00	\$ 9,000.00					
TO:	Diesel Fuel (EMS N/R) #0270-0027-02-422020	\$ 70,000.00	\$ 70,000.00					
TO:	Medical Supplies (EMS N/R) #0270-0027-02-429020	\$ 70,000.00	\$ 70,000.00					
	TOTAL	\$149,000.00	\$149,000.00					
Introduced by: O. Earl Elliott, Councilperson								
Passed in open Council this								
ATTEST: Michelle L. Edwards, City Clerk								
Presented by me to the Mayor this day of, 2022.								
Michelle Kolumb Michelle L. Edwards, City Clerk								
Approved by	me, the Mayor, this	day ofOCCGn						
	XWEC	1 Land	Duke A. Bennett, Mayor					
ATTEST: C	Michelle Lede	Saldo Michelle	e L. Edwards, City Clerk					

## REQUEST FOR ADDITIONAL APPROPRIATION

(For Approval by Mayor, Controller, and City Council)

This form is to be used when a department needs additional monies for a depleted line item or account. This form is also used for appropriations required by certain N/R accounts.

If a Department has sufficient monies in other line items to cover the funds needed in the depleted line item, a transfer of those monies should be made rather than an appropriation of new money.

DEPA	RTMENT or FUND_	EMS Fund	DATE11/1	18/2022			
FUND FROM WHICH APPROPRIATION IS TO BE MADE <u>EMS Fund (0270-0027)</u>							
	Dept or Fund	Account #	Account Name		Amount		
TO:	0270-0027	02-422010	Gasoline		\$9,000.00		
TO:	_0270-0027	02-422020	Diesel Fuel		\$_70,000.00		
TO:	0270-0027	02-429020	Medical Supplies		\$_70,000.00		
TO:					\$		
Total Amount to Be Appropriated <u>\$ 149,000.00</u>							
Department Head Approval: (Forward to Mayor)		Signature		Date:			
Mayoral Approval: (Forward to Controller)		Signature	_	Date			
Controller Approval: (Forward to Legal)		Signatura Ellis Signatura Ellis		Date 11 18 22			
Received by Legal:		Date NOV	1 8 2022 Appropriation #		# _ d		

DEPARTMENT HEAD: Please a tak I aym to tak I