PURSUANT to the authority vested in the Jefferson County Commission by law, the following Administrative Order is hereby issued:

PURPOSE

To establish a policy and procedure for County officials and departments to request additional funds or personnel.

I. POLICY

It shall be the policy of the Jefferson County Commission that County officials and departments shall be required to make requests for additional funds or personnel using the form attached to this Administrative Order.

II. PROCEDURE

It is the responsibility of every County Official and County Department Head to submit to the County Commission requests for additional funds or personnel using the form attached to this Administrative Order. If needed, additional pages may be attached to the form.

The form must be processed in the order set out on the form. No item should be completed unless each preceding item is fully completed.

The corresponding Budget Amendment to cover the request and any relevant or implementing Contract for additional funds or personnel must be attached and submitted along with the Request Form so that there is simultaneous consideration of the Request Form and the Budget Amendment and any relevant Contract.
All forms must be completely filled out with no blanks.

ORDERED at the Jefferson County Courthouse this 15 day of February, 2005.

LARRY P. LANGFORD, President
Jefferson County Commission

APPROVED BY THE
JEFFERSON COUNTY COMMISSION
DATE: 2-15-05
MINUTE BOOK: 147
PAGE(S): 348-349
JEFFERSON COUNTY
REQUEST FOR ADDITIONAL FUNDS OR PERSONNEL

1. **Originating Department:** ________________________________________________
   **Description of Request:** ________________________________________________
   __________________________________________________
   __________________________________________________
   __________________________________________________
   **Itemization of Costs:** ________________________________________________
   __________________________________________________
   __________________________________________________
   **Department Head:**
   (Original Signature)     Date

2. **Commissioner Comments:**
   ________________________________________________
   __________________________________________________
   __________________________________________________
   **Commissioner:**
   (Original Signature)     Date

3. **BMO Comments/Identify Funds Available:**
   ________________________________________________
   **BMO Chief:**
   (Original Signature)     Date

4. **County Attorney’s Contract Review (if any):**
   **County Attorney:**
   (Original Signature)     Date

5. **Finance Committee:**
   **Committee Chairman:**
   (Original Signature)     Date

6. **County Commission:** Approval Resolution

**Requirements:**

This form must be processed in the order reflected above.

This form must be submitted simultaneously with the proposed Budget Amendment and proposed Contract (if any).

All forms must be completely filled out, no blanks.