

CITY COUNCIL

For City Clerk's Use:

☐ **APPROVED** ☐ **DENIED**

Reso No. _____ File No. _____

Ord No. _____

Agenda Item No.: 9
Date: April 25, 2012

TO: Honorable Mayor and Members of the City Council
FROM: Amy Shipley, Older Adult Services Manager
SUBJECT: Senior Nutrition Program Budget Adjustment

DESCRIPTION OF REQUEST:

It is requested that Council approval a transfer of \$25,000 from the Joslyn Trust into the General Fund to offset increased costs to the Senior Nutrition Program.

Additionally, we request Council authorize the City Manager and Director of Finance to make the necessary adjustments to the Nutrition and the Senior Center budgets.

RECOMMENDATION:

Approval

FISCAL ANALYSIS:

The \$25,000 budget transfer will offset the increased costs of meals served to through the Senior Nutrition Program. Funds in the Joslyn Trust are from donations that individuals and organizations made over previous years and are designated for use in provision of senior services.

BACKGROUND:

The Escondido Senior Center Nutrition program offers meals to seniors ages 50 and above. Meals are offered to those 59 and under for \$4.00 per meal. Those 60 years and older may dine for a suggested donation of \$3.00 per meal. This program, established in 1976, still serves an average of 99 seniors per day.

The Senior Nutrition Program is provided as a service by the City. Expenses are reimbursed through CDBG and the County of San Diego Aging and Independence Services nutrition grant. The grant from the County of San Diego is specific to serving seniors 60 years and older and monthly grant reimbursements are based on the number of meals served. It is anticipated that staff will serve over 24,000 meals through the Senior Nutrition Program in Fiscal Year 11-12.

Staff is asking Council to approve the transfer of \$25,000 from the Joslyn Trust to the General Fund, and to allow the City Manager and Finance Director to make the appropriate adjustments to the Senior Nutrition Program budget.

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Respectfully submitted,

Handwritten signature of Amy Shipley in cursive script.

AMY SHIPLEY
Older Adult Services Manager

Handwritten signature of Jerry VanLeeuwen in cursive script.

JERRY VANLEEUVEN
Director of Community Services



CITY OF ESCONDIDO
BUDGET ADJUSTMENT REQUEST

Date of Request: 4/5/2012
Department: Community Services
Division: Older Adult Servcies
Project/Budget Manager: Amy Shipley x4678
Name Extension
Council Date (if applicable): April 25, 2012
(attach copy of staff report)

For Finance Use Only

Log # _____
Fiscal Year _____
____ Budget Balances
____ General Fund Accts
____ Revenue
____ Interfund Transfers
____ Fund Balance

Project/Account Description	Account Number	Amount of Increase	Amount of Decrease
Joslyn Trust	2108-001-000		\$25,000
General Fund	5131-001-107	\$25,000	
Contributions	4603-001	25,000	

Explanation of Request:

Requesting a transfer of \$25,000 from the Joslyn Trust to General Fund to cover the increased cost of meals served through the Senior Nutrition Program.

APPROVALS

[Signature] 4/18/12
Department Head Date
[Signature] 4/17/12
Finance Date
City Manager Date
City Clerk Date

Distribution (after approval):

Original: Finance