**CITY OF MADISON** **Priority # \_\_\_** 3 **\_\_\_**

 **2014 Supplemental Budget Request**

**Agency:** Traffic Engineering

**Title of Request:**  Electronic Inventory System for Sayle Street Facility

**Description of Supplemental Budget Request:**

|  |
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| TE is requesting funding to purchase software to track its extensive electronic inventory. TE purchases over one million dollars of electrical components annually. Our current inventory system does not sufficiently track inventory information for accounting, customer billing, and operational purposes. TE's communication section has an effect inventory control system and staff is studying whether this system could be expanded to track electrical inventory or another system would be more effective in maintaining accuate inventory records. |

|  |  |
| --- | --- |
| **Service # Affected** | **3000, 6000** |
|  |
| **Accounts Affected** (Attach a more detailed account/ service breakdown if appropriate.) |
|  |  |  |  |
| **Expenses** |  | Total Amount |
| 51100 - Permanent Salaries |  | $ |       |
| 51120 - Premium Pay |  | $ |       |
| 51200 - Hourly Wages |  | $ |       |
| 51300 - Overtime Wages |  | $ |       |
| 52000 - Benefits |  | $ |       |
|  |  |  |  |
| 54000’s - Purchased Services |  |  |
|       |  | $ |       |  |  |
|       |  | $ |       |  |  |
|       |  | $ |       |  | $ |       |
|  |  |  |  |
| 55000’s - Supplies |  |  |
| 55156 |  | $ | 42000 |  |  |
|       |  | $ |       |  |  |
|       |  | $ |       |  | $ |       |
|  |  |  |  |
| 56000’s - Inter-departmental Charges |  |  |
|       |  | $ |       |  |  |
|       |  | $ |       |  |  |
|       |  | $ |       |  | $ |       |
|  |  |  |  |
| 58000 - Capital Assets |  | $ |       |
|  |  |  |  |
| **Total Expense** |  |  | **$** | 42,000 |
|  |  |  |  |
| **I/D Billings/Revenue** |  |
|       |  | $ |       |  |  |
|       |  | $ |       |  | $ |       |
| **Net Impact** |  |  | **$** | 42,000 |
|  |  |  |  |

|  |
| --- |
| **THIS IS A REQUEST TO:** |
|  |  |
| [x]  | Continue an existing service or program |
| [ ]  | Expand or increase an existing service or program |
| [ ]  | Add a new service or program |
|  |  |
| Notes: |
|       |
| Does this request impact any results tracked by performance measures, including Madison Measures? [ ]  Yes [ ]  NoIf Yes, which measure(s) is it? Please quantify the potential impacts to the extent possible. |
|       |
|  |
| INSTRUCTIONSThis form is to be used for 2014 Operating Budget requests that exceed your agency's target. A form should be completed for each individual decision item. Please submit these supplemental request forms along with your base budget submission. |