LUBBOCK COUNTY COMMISSIONERS COURT

Monday, September 15, 2025

COUNTY AUDITOR:

Α.		Budget Adjustments: Transfers	& Amendn	nents	
BA#	0657		Budget T	<u>ransfers</u>	
162		011-044 Constable Pct #4			575.00
163		011-081 General Fund Xfer			2,726.00
164		020-190 Consonlidated R&B			143,436.00
165		031-191 Precinct #1 Park			4,923.00
166		033-193 Idalou/New Deal Park			419.00
167		075-075 Dispute Resolution Office			2,705.00
168		083-077 Election Services			32,215.00
169		090-023 District Clerk Records Mgt & Pres			24.00
170		092-001 County Records Mgt & Pres			16.00
171		093-046 Courthouse Security			18,207.00
172		095-001 Local Truancy Prevent & Divers			14.00
173		108-001 JP1 Justive Court Technology			10.00
174		145-047 Sheriff Commissary Salary			35,086.00
				Line Item Transfers TOTAL \$	240,356.00
				_	
			<u>Budget Am</u>	endments:	
175		077-075 Domestic Relations Office			6,000.00
176		081-081 Law Library			2,726.00
				Budget Amendments TOTAL \$	8,726.00

BUDGET ADJUSTMENT AUTHORIZATION

Commissioners' Court Action: Approved	Denied	Other
The Commissioners' Court of Lubbock Cou as presented and authorized by Local Gover	•	
Passed this 15 th day of September 2025, on	a motion b	py
and seconded by		
	C	Curtis Parrish, County Judge

Fund Name/Dept:	044 CONSTABLE 4	Contact:_	JOE PINSON	Date: _	9/3/2025
	sted that a Budget Amendmer		Line Item Transfer_	xxxxx	
k	pe approved for the purpose o	f: TRANSFER FUNDS F	ROM COMMUNICATIONS TO S	SUPPLIES / OTHER OPER EXP FOR	A RIFLE RACK
Move funds from:			Move funds to:		
Fund/Account No.	Account Name	Amount	Fund/Account No.	Account Name	Amount
01104430-540100	Communications	\$575.00	01104430-520100	SUPPLIES	\$575.00
		\$ 575.00		\$	575.00

	Department: 011-007 Non-Dept		Contact:	Kathy William	<u>s</u>	Date:	9/5/2025
Move funds from: Move funds to: Fund/Account No. Account Name Amount Fund/Account No. Account Name Amount Amount O1100710-599501 CONTINGENCY-PAYROLL 2,726.00 O11-908100 XFER TO LAW LIBRARY 2,726.00 O11-908100 Amount O1100710-599501 O11-908100 O11-9081	It is requested that a Bu	idget Amendment					
Fund/Account No. Account Name		be approved for the purpose of:	Xfer to Law Library	Salary/Fringe Adjustme	ent		
Fund/Account No. Account Name							
01100710-599501 CONTINGENCY-PAYROLL 2,726.00 011-908100 XFER TO LAW LIBRARY 2,726.00	Move funds from:			Move funds to	:		
	Fund/Account No.	Account Name	Amount	Fund/Account No.	Account	Name	Amount
\$ 2,726.00	01100710-599501	CONTINGENCY-PAYROLL	2,726.00	011-908100	XFER TO LAW	V LIBRARY	2,726.00
\$ 2726.00							
\$ 2,726,00							
\$ 2726.00							
\$ 2,726,00							
\$ 2,726.00							
\$ 2726.00							
\$ 2726.00							
\$ 2,726,00							
\$ 2,726,00							
\$ 2,726,00							
\$ 2,726,00 \$ 2,726,00							
		\$	2 726 00			\$	2 726 00

Department:	020-Consonlidated R&B	Contact:	Rodshadi Moore	Date:	9/4/2025
It is requested that a Budget	Amendment		Line Item Transfer	xxx	
	be approved for the purpose of:	Salary/Fringe Adjust	tment		
Move funds from:			Move funds to:		
Fund/Account No.	Account Name	Amount	Fund/Account No.	Account Name	Amount
02019090-500600	STAFF EMPLOYEES	143,436.00	02019090-510900	WORKER'S COMPENSATION	115,386.00
			02019090-510400	GROUP HEALTH INSURANCE	28,050.00
	\$	143,436.00		\$	143,436.00

Department: 031-Precinct #1 Park It is requested that a Budget Amendment be approved for the purpose of: S		Contact:	Mike Dalby	Date:	9/4/2025
		of: Salary/Fringe Adju	Line Item Transfer	xxx	
Move funds from:			Move funds to:		
Fund/Account No.	Account Name	Amount	Fund/Account No.	Account Name	Amount
03119180-500800	TEMPORARY	4,923.00	03119180-510400	GROUP HEALTH INSURANCE	4,865.00
			03119180-510300	RETIREMENT	44.00
			03119180-510600	LIFE INSURANCE	10.00
			03119180-510500	GROUP DENTAL INSURANCE	4.00
		\$ 4,923.00		\$	4,923.00

REQUEST FOR BUDGET AMENDMENT/LINE ITEM TRANSFER

Department:	033-Idalou/New Deal Park	Contact: _	Cary Shaw	•	9/4/2025
It is requested that a Budget Am	nendment		Line Item Transfer	XXX	
	be approved for the purpose o	f: Salary/Fringe Adjus	tment		
Move funds from:			Move funds to:		
Fund/Account No.	Account Name	Amount	Fund/Account No.	Account Name	Amount
03319380-500800	TEMPORARY	419.00	03319380-510500	GROUP DENTAL INSURANCE	291.00
			03319380-510400	GROUP HEALTH INSURANCE	128.00

419.00

419.00

Department: <u>075-DRC</u> It is requested that a Budget Amendment		Contact:	Gene Valentini	Date:	9/4/2025
			Line Item Transfer	XXX	
	be approved for the purpose of	True Up Fringe Line	es		
Move funds from:			Move funds to:		
Fund/Account No.	Account Name	Amount	Fund/Account No.	Account Name	Amount
07507525-500600	STAFF EMPLOYEES	2,705.00	07507525-510400	GROUP HEALTH INSURANCE	2,653.00
			07507525-510500	GROUP DENTAL INSURANCE	52.00
<u> </u>	\$	\$ 2,705.00		\$	2,705.00

REQUEST FOR BUDGET AMENDMENT/LINE ITEM TRANSFER

Department: 083-Election Services	Contact:	Roxzine Stinson		Date:	9/4/2025		
It is required that a Budget Amondment		rs Line Item Tropofer	VVV				
It is requested that a Budget Amendment Line Item Transfer XXX be approved for the purpose of: Salary/Fringe Adjustment							

Move funds from: Move funds to:

Fund/Account No.	Account Name	Amount	Fund/Account No.	Account Name	Amount
08307770-500600	STAFF EMPLOYEES	12,215.00	08307770-500700	OVERTIME COMPENSATION	17,293.00
08307770-500800	TEMPORARY	20,000.00	08307770-510400	GROUP HEALTH INSURANCE	10,726.00
			08307770-510900	WORKER'S COMPENSATION	3,240.00
			08307770-510500	GROUP DENTAL INSURANCE	547.00
			08307770-510300	RETIREMENT	364.00
			08307770-510600	LIFE INSURANCE	45.00

\$ 32,215.00 \$ 32,215.00

Department: 0	090-Dist Clrk Records Mgt & Fees	Contact:	Sara Smith	Date:	9/4/2025
It is requested that a Budget Amendment			rs Line Item Transfer	xxx	
	be approved for the purpose of:	Salary/Fringe Adjust	ment		
Move funds from:			Move funds to:		
Fund/Account No.	Account Name	Amount	Fund/Account No.	Account Name	Amount
09002320-500800	TEMPORARY	24.00	09002320-510900	WORKER'S COMPENSATION	24.00
	\$	24.00		\$	24.00

REQUEST FOR BUDGET AMENDMENT/LINE ITEM TRANSFER

Department:	092-Co records Mgt & Pres	Contact:_		Date:_	9/4/2025
It is requested that a Budget A	mendment		Line Item Transfer	xxx	
	be approved for the purpose of	: Salary/Fringe Adjus	stment		
Move funds from:			Move funds to	:	
Fund/Account No.	Account Name	Amount	Fund/Account No.	Account Name	Amount
09200110-500600	STAFF EMPLOYEES	16.00	09200110-510600	LIFE INSURANCE	10.00
			09200110-510700	UNEMPLOYMENT INSURANCE	3.00
			09200110-510900	WORKER'S COMPENSATION	2.00
			09200110-510500	GROUP DENTAL INSURANCE	1.00

16.00

\$

16.00

\$

REQUEST FOR BUDGET AMENDMENT/LINE ITEM TRANSFER

Department: 093-Courthouse Security	Contact:	Dan Corbin	D	ate: 9/4/2025
It is requested that a Budget Amendment be approved for the pu	rpose of: True Up Fringe Lines	Line Item Transfer	xxx	
Move funds from:		Move funds to:		

Fund/Account No.	Account Name	Amount	Fund/Account No.	Account Name	Amount
09304630-500600	STAFF EMPLOYEES	18,207.00	09304630-510300	RETIREMENT	7,551.00
			09304630-510100	FICA	3,828.00
			09304630-510900	WORKER'S COMPENSATION	2,956.00
			09304630-510400	GROUP HEALTH INSURANCE	2,915.00
			09304630-510200	MEDICARE	895.00
			09304630-510700	UNEMPLOYMENT INSURANCE	62.00

Department: 095- Local Truancy It is requested that a Budget Amendment		Contact:	KW	Date:	9/4/2025
			Line Item Transfer	XXX	
t	be approved for the purpose o	True Up Salary/Fri	nge Lines		
Move funds from:			Move funds to:	:	
Fund/Account No.	Account Name	Amount	Fund/Account No.	Account Name	Amount
09500110-500800	TEMPORARY	14.00	09500110-510700	UNEMPLOYMENT INSURANCE	14.00
		\$ 14.00		\$	14.00

Department: 108-JP#1 JusticeCourtTech		Contact:	KW		9/4/2025
It is requested that a Budge	et Amendment		Line Item Transfer	XXX	
1	be approved for the purpose of	f: True Up Fringe Line	es		
Move funds from:			Move funds to:		
Fund/Account No.	Account Name	Amount	Fund/Account No.	Account Name	Amount
10800120-500800	TEMPORARY	10.00	10800120-510900	WORKER'S COMPENSATION	7.00
			10800120-510700	UNEMPLOYMENT INSURANCE	3.00
L		\$ 10.00		\$	10.00

REQUEST FOR BUDGET AMENDMENT/LINE ITEM TRANSFER

Department: 145-Sheriff Commissary Salar	ry Contact:	Dan Corbin		Date:	9/4/2025
It is requested that a Budget Amendment		Line Item Transfer	xxx		
be approved for the purp	ose of: True Up Fringe Lines				
Move funds from:		Move funds to:			

Fund/Account No. Account Name Fund/Account No. **Account Name** Amount Amount 15,443.00 14504730-500600 STAFF EMPLOYEES 14504730-500700 OVERTIME COMPENSATION 22,538.00 14504730-510400 GROUP HEALTH INSURANCE 19,643.00 14504730-501400 INCENTIVE PAY 4,544.00 14504730-510300 RETIREMENT 4,041.00 14504730-510900 WORKER'S COMPENSATION 3,087.00 14504730-501300 LONGEVITY 876.00

\$ <u>35,086.00</u> \$ <u>35,086.00</u>

BUDGET AMENDMENT AUTHORIZATION

Commissioners' Court Action: Approved	Denied	Other
The Commissioners' Court of Lubbock Cou as an amendment to the original budget and authorized by Local Government Code §11	order the	
Passed this 15 th day of September 2025, on a and seconded by	a motion b	ру
	Ċ	Curtis Parrish, County Judge

REQUEST FOR BUDGET AMENDMENT/LINE ITEM TRANSFER

Fun	d Name/Dept: 075 / Dispute Resolution	Contact:	Kristi Thompson	Date: _	8/25/2025
	It is requested that a Budget Amendment	x	Line Item Transfer		
	be approved for the purpose of: cor	recting budget du	e to underestimate of revenue and o	corresponding contrac	ct service
expenses.					
	_			•	

Move funds from: Move funds to:

Fund/Account No.	Account Name	Amount	Fund/Account No.	Account Name	Amount
			077-438200	Service Fees	6,000.00
			07707525-562200	Contract Services	6,000.00
<u> </u>	\$				12,000.00

- 1. Must be on the County's approved form, found on the N Drive, in Excel format.
- 2. Must be typed.
- 3. Use whole dollars, NO cents
- 4. Include adequate description for the adjustment or it will not be submitted;
- a. Phrases such as —"unanticipated expenses, to complete year or complete budget year"-do not provide sufficient information and should be avoided.
- 5. Funding in personnel line items cannot be transferred into operating line items and vice versa without prior consent from Commissioners' Court.
- 6. Line-item transfers/budget amendments must be approved prior to securing a purchase order that will place the expenditure line item into a deficit balance.
- 7. Budget adjustments-Line item transfers/Amendments will need to be entered in Munis, the LIT form along with any backup documentation must be attached in PDF format to your entry in Munis.

Scott, Rhonda

From: Thompson, Kristi

Sent: Thursday, September 4, 2025 4:59 PM

To: Scott, Rhonda **Subject:** Fund 077

Attachments: 2025.09.08 Budget v. Projected.pdf; 0-2025.09.04 Estimated Year End 077 ONLY.pdf;

2025.09.04 Financial 077 ONLY.pdf

Rhonda-

I have attached the documents I use to estimate (guesstimate?) my year end figures. I anticipate that we will end the year with a surplus of \$40,744.75, which includes the ARPA funds. The prior fund balance is (\$12,615.65), so after that is cleared, we will have \$28,129.10 left to go into the fund balance. Obviously, my numbers are not solid, because they are just estimates and I include the full amount for the last payroll of the year rather than doing the percentage split.

My concern is Contract Services. Based on the financial I ran today (attached), we only have \$5,710.61 remaining. Although we average \$3,000-\$4,000 each Court, my concern is indicated by the amount we are paying out on 09/08/25, which is \$5,067.50. Since we are required to pay based on when the service was provided, then I have used the average of \$3,749.61 per Court for the next three courts (09/22, 10/13, and 10/27). I don't think the 10/27 will be nearly as high, but I don't want to have a problem if it does go up. With the earlier deadlines, it is possible it will be higher than it has been in the past. As I mentioned on the phone, I was correlating the service fees to the contract services, but the amount coming in on that line item directly effects the amount going out of contract services.

If there is another way I should be doing this, then I'm very happy to learn. The way I do the estimates isn't very sophisticated, but they have been fairly accurate – including last year when we had deficits.

I hope this makes any kind of sense. Please let me know if any questions.

Kristi Thompson Assistant Director

Texas Dispute Resolution System
Office of Dispute Resolution for Lubbock County

916 Main Street, Ste 800 P.O. Box 10536 Lubbock, Texas 79408 806-775-1720 | 866-329-3522

Financials as of 09.04.2025

							Projected		Projected			
Line Item #	Line Item		Budgeted		Actual		Projected	TOTAL		[Difference	
REVENUE												
077-438010	DRO Fees	\$	16,320.00	\$	13,186.23	\$	2,637.24	\$	15,823.47	\$	496.53	
077-438100	Admin Fees	\$	-	\$	70.00	\$	-	\$	70.00			
077-438200	Service Fees	\$	36,000.00	\$	40,531.25	\$	7,195.75	\$	47,727.00	\$	(11,727.00)	
077-438510	Super Visitation	\$	21,600.00	\$	18,728.25	\$	3,019.66	\$	21,747.91	\$	(147.91)	
077-438700	Comm Supervision	\$	60,000.00	\$	52,751.10	\$	9,000.00	\$	61,751.10	\$	(1,751.10)	
077-470000	Interest Income	\$	-	\$	330.92	\$	-	\$	330.92	\$	(330.92)	
077-810600	ARPA	\$	75,000.00	\$	75,000.00	\$		\$	75,000.00	\$	-	
			EXPEN	SES								
077-075-5002000-25	Appointed Officials	\$	-	\$	-	\$	-	\$	-	\$	-	
077-075-5006000-25	Staff Employees	\$	1,116.00	\$	1,115.19	\$	-	\$	1,115.19	\$	0.81	
077-075-5008000-25	Seasonal/Temp	\$	109,250.00	\$	66,328.77	\$	11,632.00	\$	77,960.77	\$	31,289.23	
077-075-5101000-25	FICA	\$	4,348.00	\$	4,176.05			\$	4,176.05	\$	171.95	
077-075-5102000-25	Medicare	\$	1,017.00	\$	976.85			\$	976.85	\$	40.15	
077-075-5103000-25	Retirement	\$	124.00	\$	123.89			\$	123.89	\$	0.11	
077-075-5104000-25	Group Health	\$	330.00	\$	329.28			\$	329.28	\$	0.72	
077-075-5105000-25	Group Dental	\$	19.00	\$	18.71			\$	18.71	\$	0.29	
077-075-5106000-25	Life Insurance	\$	60.00	\$	2.68			\$	2.68	\$	57.32	
077-075-5107000-25	Unemployment Ins	\$	91.00	\$	62.69			\$	62.69	\$	28.31	
077-075-5109000-25	Worker's Comp	\$	189.00	\$	182.10			\$	182.10	\$	6.90	
	Benefits	\$	6,178.00	\$	5,872.25	\$	957.25	\$	6,829.50	\$	(651.50)	
077-075-5201000-25	Supplies	\$	2,896.00	\$	1,537.76	\$	100.00	\$	1,637.76	\$	1,258.24	
077-075-5228000-25	Law Books	\$	200.00	\$	-	\$	221.00	\$	221.00	\$	(21.00)	
077-075-5503000-25	Travel & Training	\$	2,100.00	\$	1,273.20	\$	100.00	\$	1,373.20	\$	726.80	
077-075-5505000-25	Association Dues	\$	680.00	\$	530.00	\$	-	\$	530.00	\$	150.00	
077-075-5622000-25	Contract Services	\$	86,500.00	\$	80,789.39	\$	11,248.84	\$	92,038.23	\$	(5,538.23)	

						Notes
D. J				4		Notes
Balance as of 09.04.25				\$	43,151.19	
Expected Revenue						
DRO Fees	\$	2,637.24	\$ 2,637.24			Oct - July avg \$1318.62
Service Fees - Pending CC	\$	-				
Service Fees	\$	7,195.75	\$ 7,195.75			Oct - July average: \$3,977.25; \$758.75 posted Aug
Supervised Visitation - Pending CC	\$	-				
Supervised Visitation	\$	3,019.66	\$ 3,019.66			Oct - July average: \$1,812.33; \$605 posted Aug
Community Supervision Fees	\$	9,000.00	\$ 9,000.00			\$4,500 per month
Total Expected Revenue				\$	21,852.65	
Expected Expenses						
Appointed Officals	\$	-	\$ -			
Staff Employees	\$	-	\$ -			
Temp/Seasonal	\$	(11,632.00)	\$ (11,632.00)			
Benefits	\$	(957.25)	\$ (957.25)			
Supplies - Officewise	\$	(30.00)				average \$15 per month
Supplies - Background checks	\$	(10.00)				average \$5 per month
Supplies - Other	\$	(60.00)	\$ (100.00)			average \$30 per month
Law Books	\$	(221.00)	\$ (221.00)			Texas Family Code
Travel and Training - Field Visits	\$	(100.00)				mileage for field visits avg. \$50 per month
Travel and Training - Other			\$ (100.00)			
pmts to Mediators/SW/Officers	\$	(11,248.84)	\$ (11,248.84)			
Total Expected Expenses				\$	(24,259.09)	

Estimated Balance end of FY25 \$ 40,744.75

Prior Fund Balance
Estimated remaining fund balance end of FY25 \$ 28,129.10

Lubbock County



YEAR-TO-DATE BUDGET REPORT

FOR 2025 13							
ACCOUNTS FOR: 077 DOMESTIC RELATIONS OFFICE	ORIGINAL APPROP	TRANFRS/ ADJSTMTS	REVISED BUDGET	YTD ACTUAL	ENCUMBRANCES	AVAILABLE BUDGET	PCT USE/COL
077 DOMESTIC RELATIONS OFFICE							
077 438010 DRO FEES LUBBOCK COU 077 438100 ADMIN FEES 077 438200 SERVICE FEES 077 438510 SUPERVISED VISITATIO 077 438700 COMMUNITY SUPERVISIO 077 470000 INTEREST INCOME 077 810600 XFER FROM ARPA TOTAL DOMESTIC RELATIONS OFFICE	-16,320 0 -36,000 -21,600 -60,000 0 -75,000	0 0 0 0 0 0	-16,320 0 -36,000 -21,600 -60,000 0 -75,000 -208,920	-13,186.23 -70.00 -40,531.25 -18,728.25 -52,751.10 -330.92 -75,000.00 -200,597.75	.00 .00 .00 .00 .00 .00	-3,133.77 70.00 4,531.25 -2,871.75 -7,248.90 330.92 .00 -8,322.25	112.6% 86.7%* 87.9%*
07707525 Domestic Relations Office							
07707525 500600 STAFF EMPLOYEES 07707525 500800 TEMPORARY 07707525 510100 FICA 07707525 510200 MEDICARE 07707525 510300 RETIREMENT 07707525 510400 GROUP HEALTH IN 07707525 510600 LIFE INSURANCE 07707525 510600 LIFE INSURANCE 07707525 510700 WORKER'S COMPEN 07707525 520100 SUPPLIES/OTH OP 07707525 520100 SUPPLIES/OTH OP 07707525 520800 LAW BOOKS 07707525 550300 TRAVEL AND TRAI 07707525 562200 CONTRACT SERVIC	76,232 20,440 4,348 1,017 5,520 8,232 415 60 91 189 2,896 2,00 4,600 680 84,000	-75,116 88,810 0 0 -5,396 -7,902 -396 0 0 0 -2,500	1,116 109,250 4,348 1,017 124 330 19 60 91 189 2,896 200 2,100 680 86,500	1,115.19 66,328.77 4,176.05 976.85 123.89 329.28 18.71 2.68 62.69 182.10 1,537.76 .00 1,273.20 530.00 80,789.39	.00 .00 .00 .00 .00 .00 .00 .00 .00 .00	.81 42,921.23 171.95 40.15 .11 .72 .29 57.32 28.31 6.90 858.73 .00 826.80 150.00 5,710.61	99.9% 60.7% 96.0% 96.1% 99.9% 99.8% 98.5% 4.5% 68.9% 96.3% 70.3% 100.0% 60.6% 77.9% 93.4%
TOTAL Domestic Relations Office	208,920	0	208,920	157,446.56	699.51	50,773.93	75.7%
TOTAL DOMESTIC RELATIONS OFFICE	0	0	0	-43,151.19	699.51	42,451.68	100.0%
TOTAL REVENUES TOTAL EXPENSES	-208,920 208,920	0	-208,920 208,920	-200,597.75 157,446.56	.00 699.51	-8,322.25 50,773.93	
PRIOR FUND BALANG CHANGE IN FUND BA REVISED FUND BALA	ALANCE - NET	OF REVENUES/	EXPENSES	-12,615.65 43,151.19 30,535.54			

Department: 081-Law Library		Contact: _	Michele Campbe	Date: _	9/5/2025
It is requested that a Budget Amendment		xxx	Line Item Transfer	rs	
	be approved for the purpose of	Salary/Fringe Adjust	stment		
Move funds from:			Move funds to		
Fund/Account No.	Account Name	Amount	Fund/Account No.	Account Name	Amount
			081-801100	XFER FROM GENERAL FUND	2,726.00
			08108125-500600	STAFF EMPLOYEES	1,735.00
			08108125-510300	RETIREMENT	546.00
			08108125-510100	FICA	378.00
			08108125-510900	WORKER'S COMPENSATION	32.00
			08108125-510400	GROUP HEALTH INSURANCE	18.00
			08108125-510600	LIFE INSURANCE	10.00
			08108125-510700	UNEMPLOYMENT INSURANCE	7.00
<u> </u>		\$ -		\$	5,452.00