

CIP – NEW PROJECT REQUEST FORM

Project Name: Auditor Recorder Office Remodel

Project Number: _(Finance will provide number)

Project Manager: TBD

Department/Division: Auditor and Recorder

	<u>Year 1</u>	<u>Year 2</u>	<u>Year 3</u>	<u>Year 4</u>	<u>Year 5</u>	<u>Total</u>
<u>Revenues</u>						
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
Total Revenues	_____	_____	_____	_____	_____	_____

<u>Expenditures</u>						
TBD	200,000	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
Total Expenditures	_____	_____	_____	_____	_____	_____

Comments: Funding Requested to obtain new Office Furniture for Auditor and Recorder's Office and carpet and paint in area's not already funded within the two offices. Current set up has security concerns for employees and configuration does not provide ample works space.