

## Annual County Budget Instructions – LF Forms


Link to form: <https://it-lf-ecmf.tamu.edu/Forms/countybudget>

**Note: Form will need to be completed at one time, currently no option to save & submit later**

### Home Tab

## ANNUAL COUNTY BUDGET

(Prev. CB-5)



Home

Extension Agent Personnel

Staff Personnel

Fringe Benefits

Operating Expenses

Sign & Submit

The **Annual County Budget** form is utilized by county offices to submit their approved budget for the new fiscal year to Texas A&M AgriLife Extension Service. This document holds significance as it serves as the basis for entering payroll actions for County Extension Agents, incorporating changes in salary and longevity.

Only one Annual County Budget (prev. CB-5) form can be submitted per county per fiscal year unless there is a change to salary and/or operating totals after the effective date of the county's fiscal year.

**Is this a Revised Annual County Budget form? \*** (?)

☐ Yes

☐ No

**County \***

▼

**District**

▼

**Fiscal Year**

2025

**Fiscal Year Date Range \***

▼

**County Pay Schedule \***

☐ Bi-weekly                      ☐ Monthly

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Indicate whether this is a revised form or an original

- A revised form is ONLY necessary if there are changes in salary and/or operating totals effective AFTER the fiscal year start date
- If completing a revised Annual County Budget form, indicate the effective date of the revision

Fill in the County Name, Fiscal Year Date Range, and County Pay Schedule (all other data will auto-populate)

## Extension Agent Personnel Tab

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### County Extension Agent Personnel

Click "Add" for each additional position. Include any budgeted vacancies by adding the position in the Name field. (ex. Vacant - CEA-FCH)

Name	Base Salary*	Longevity	Travel**
<input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
<a href="#" style="color: blue; font-size: small;">Add</a>			
<b>Subtotal for Base Salary</b>			
\$ <input type="text" value="0.00"/>			
<b>Subtotal for Longevity</b>			
\$ <input type="text" value="0.00"/>			
<b>Subtotal for Travel</b>			
\$ <input type="text" value="0.00"/>			
<b>Grand Total for County Extension Agent Personnel</b>			
\$ <input type="text" value="0.00"/>			

**Base salary\*:** On currently filled positions, this is the actual annual salary of the agent in the position (not including any monthly vehicle or cell phone allowance or stipend).

**Travel\*\*:** Annual travel allowances which may include mileage, lodging and meals and/or monthly travel stipends.

Please explain any annual salary increase/decrease over a \$2,400 threshold for each County Extension Agent in the comment box below.

¶ **B** *I* U **[List Icons]** **[Link Icon]** **[Print Icon]**

Optional Documentation for Salary Change <sup>(?)</sup>

Upload

Only PDF allowed\*

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On this tab, provide payroll information for each County Extension Agent paid by the County (include any budgeted vacancies by adding the position in the Name field, i.e. Vacant – CEA-FCH)

- Include each County Extension Agent's name, base salary, longevity, and travel, as applicable
- Utilize the "Add" button for additional County Extension Agents
- Subtotals and Grand Totals will auto-sum
- If a County Extension Agent's salary increased/decreased over \$2,400 since the previous year, **please add an explanation in the text box provided.** You can also upload any supporting documents.

## Staff Personnel Tab

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### County Staff Personnel

Secretaries, Office Managers, Program Assistants, etc. paid by county only. Click "Add" for each additional position. Include vacant positions.

Name	Position	Base Salary*	Longevity	Travel**
<input type="text"/>	<input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
<a href="#">Add</a>				
<b>Subtotal for Base Salary</b>				
\$ <input type="text" value="0.00"/>				
<b>Subtotal for Longevity</b>				
\$ <input type="text" value="0.00"/>				
<b>Subtotal for Travel</b>				
\$ <input type="text" value="0.00"/>				
<b>Grand Total for County Staff Personnel</b>				
\$ <input type="text" value="0.00"/>				

**Base salary\*:** On currently filled positions, this is the actual annual salary of the agent in the position (not including any monthly vehicle or cell phone allowance or stipend).

**Travel\*\*:** Annual travel allowances which may include mileage, lodging and meals and/or monthly travel stipends.

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On this tab, provide payroll information for each County Support Staff Personnel (i.e. Secretary, Office Managers, Program Assistants, including any vacant positions (if vacant, list "Vacant"))

- Include each County Support Staff personnel's name, position, base salary, longevity, and travel, as applicable
- Utilize the "Add" button for additional County Staff Personnel
- Subtotals and Grand Totals will auto-sum

## Fringe Benefits Tab

**ANNUAL COUNTY BUDGET**  
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### Fringe Benefits

Please include FICA, insurance, retirement, workers compensation, unemployment, social security, etc. for all agents & staff noted above.

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**Fringe Benefits Lump Sum**

\$

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On this tab, provide the lump sum amount for all fringe benefits for all County Extension Agents and County Support Staff

## Operating Expenses Tab

# ANNUAL COUNTY BUDGET

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## Operating Expenses

Items listed below should not be included in other line items on this form.

### Capital Outlay

\$

Vehicle/Equipment purchases over \$5,000 in value.

### All Other Operating Expenses

\$

Supplies, repairs, copiers, telephones, postage, utilities, janitorial services, rentals, allowances, travel (not accounted for above), etc.

### Supplemental Info Upload (?)

May include approved county budget, budget detail, etc.

Only PDF allowed\*

### Grand Total for Operating Expenses


\$

On this tab, provide the following lump sum amounts:

- Capital Outlay (any equipment purchases over \$5,000)
- All Other Operating Expenses (see examples provided within the form)
- Supplemental Information Upload (may include approved county budget, budget detail, etc.)
- Grand Total for Operating Expenses will auto-sum

## Sign & Submit Tab

**ANNUAL COUNTY BUDGET**  
*(Prev. CB-5)*



Home	Extension Agent Personnel	Staff Personnel	Fringe Benefits
Operating Expenses	Sign & Submit		

**Grand Total for County Budget**  
\$ 0.00

The Commissioners' Court of said county, as authorized by Texas Agriculture Code, Section 43, in cooperation with Texas A&M AgriLife Extension Service, agrees to provide financial support of county AgriLife Extension work in the respective amounts indicated on this Annual County Budget.

**Date:**  
Date will be captured on form submission

**Signature of County Official\***

**Printed Name of County Official\***

**County Official's Title\***

**County Official's Phone Number\***  
Must include dashes. Ex. 555-555-5555

**County Official's Email\***

**Additional Supplemental Information Upload (?)**  
May include approved county budget, budget detail, etc.  
  
Only PDF allowed\*

To finalize the form, provide the following:

- Sign and print the County Official's name, title, phone number, and email address
- Additional Supplemental Information Upload (provide any supplemental documentation applicable)
- Grand Total for County Budget will auto-sum all tabs and appears at the top of this tab

Click Submit to complete the form. Upon submission, a confirmation page will appear and a copy of the submitted Annual County Budget form will automatically be emailed to the email address entered for the County Official. A copy of the final approved form will be emailed to the County Official upon approval of the form by the AgriLife Extension's Budget Office.