

**Form Number 500**

**Agency Adjustment Summary**

State of Nebraska - Administrative Services - Budget Division

|        |                    |  |
|--------|--------------------|--|
|        | PAGE NUMBER        |  |
|        | CODE & DESCRIPTION |  |
| AGENCY |                    |  |
|        |                    |  |
|        |                    |  |

| EXPENDITURE ACCOUNT                        | ADJUSTMENTS |  |
|--|-------------|--|
|  | 2008-2009   |  |
| Permanent F.T.E. Positions                 |             |  |
| 511100 Permanent Salaries - Wages          |             |  |
| 511200 Temporary Salaries - Wages          |             |  |
| 511600 Per Diem Payments                   |             |  |
| 511900 Supplemental (One-time payments)    |             |  |
| All Other Salaries                         |             |  |
| <b>Sub-Total Salaries</b>                  |             |  |
| 515100 Retirement Plans Expense            |             |  |
| 515200 OASDI Expense                       |             |  |
| 515400 Life and Accident Insurance Expense |             |  |
| 515500 Health Insurance Expense            |             |  |
| All Other Personal Services                |             |  |
| <b>Sub-Total Benefits</b>                  |             |  |
| 510000 Personal Services                   |             |  |
| 520000 Operating Expenses                  |             |  |
|  |             |  |
|  |             |  |
|  |             |  |
| 570000 Travel Expenses                     |             |  |
| 580000 Capital Outlay                      |             |  |
| 590000 Government Aid                      |             |  |
| <b>Total Expense</b>                       |             |  |
| Means of Financing                         |             |  |
| General Fund                               |             |  |
| Cash Fund                                  |             |  |
| Federal Fund                               |             |  |
| Revolving Fund                             |             |  |
| <b>Total Funding</b>                       |             |  |
| Personal Services Limitation (PSL)         |             |  |

Note: In the blank lines under Operating Expenses, itemize individual line items that comprise a significant portion of the Total Operating Expenses.