

City of Jacksonville, Florida
Request for Budget Transfer Form

3

Finance & Administration
Department or Area Responsible for Contract / Compliance / Oversight

N/A
Council District(s)

Reversion of Funds: _____
(if applicable) Subfund / Indexcode / Subobject / Project Prj-Dtl / Grant Grt-Dtl

Fiscal Yr(s) of carry over (all-years funds do not require a carryover): _____

Section of Code Being Waived (if applicable): _____

CIP (yes or no): _____

Justification for Waiver

Justification for / Description of Transfer:
To return excess FY 18 General Liability Loss Provision in the total amount of \$377,526.04 to Jacksonville Electric Authority(JEA) - \$174,483.51 and Jacksonville Housing Authority(JHA) - \$203,042.53. To return excess FY 18 Workers' Comp Loss Provision in the total amount of \$515,027.96 to Jacksonville Electric Authority (JEA)- \$496,667.13 and Jacksonville Housing Authority (JHA) -\$18,360.82. This will not impact the Risk Management Case Reserves for current operations.

Total Amount Appropriated: \$892,553.99

CITY COUNCIL

Requesting Council Member: _____ CM's District: _____
Requesting Council Member: _____ CM's District: _____
Prepared By: _____ Ordinance: _____

OFFICE OF THE MAYOR

BUDGET ORDINANCE TRANSFER DIRECTIVE

TD / BT Number: BT19-095

	Date Rec'd.	Date Fwd.	Approved	Disapproved
Department Head	5/20/19	5/20/19	<i>[Signature]</i>	
Mayor's Office	MAY 2 8 2019		<i>[Signature]</i>	
Accounting Division	5-15-19	5/16/19	<i>[Signature]</i>	
Budget Division	5-10-19		<i>[Signature]</i>	

Date of Action By Mayor: MAY 2 8 2019

Approved: *[Signature]*

Division Chief: Twane Duckworth *[Signature]*

Date Initiated: 4/15/19

Prepared By: Bibinia Centeno

Phone Number: 904 255-5311

Initiated / Requested By (if other than Department): _____

**APPROVED BY:
MAYOR'S BUDGET
REVIEW COMMITTEE**

DATE
MAY 2 8 2019

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RECEIVED

MAY 16 2019

BUDGET DIVISION

Budget Transfer Line Item Detail

TRANSFER FROM: (Revenue line items in this area are being appropriated and expense line items are being de-appropriated.)

Rev Exp	SF ID	Subfund Title	Activity / Grant Title	Line Item / Subobject Title	Amount	Accounting Codes							
						Indexcode	Subobject	Project	Prj-Dtl	Grant	Grt-Dtl	User Code	
					Total: \$892,553.99								
Rev	561	Self Insurance	Self Insurance - Fund Level Activity	Transfer From Retained Earnings	\$892,553.99	JXSF561	38902						

Transfer To: (revenue Line Items In This Area Are Being De-appropriated And Expense Line Items Are Being Appropriated.)

Rev Exp	Sf Id	Subfund Title	Activity / Grant Title	Line Item / Subobject Title	Amount	Accounting Codes							
						Indexcode	Subobject	Project	Prj-Dtl	Grant	Grt-Dtl	User Code	
					Total: \$892,553.99								
Exp	561	Self Insurance	General/Auto Liability Program	Return Of Equity-JEA	\$174,483.51	AFRM561GL	04940						INSJEA
Exp	561	Self Insurance	General/Auto Liability Program	Return Of Equity-JHA	\$203,042.53	AFRM561GL	04940						INSJHA
Exp	561	Self Insurance	Workers' Compensation	Return Of Equity-JEA	\$496,667.13	AFRM561WC	04940						INSJEA
Exp	561	Self Insurance	Workers' Compensation	Return Of Equity-JHA	\$18,360.82	AFRM561WC	04940						INSJHA
