

**City of Jacksonville, Florida
Request for Budget Transfer Form**

Department or Area Responsible for Contract / Compliance / Oversight: Court Administration Council District(s): _____

Reversion of Funds: _____ Fiscal Yr(s) of carry over (all-years funds do not require a carryover): _____
(if applicable) Fund / Center / Account / Project * / Activity / Interfund / Future

Section of Code Being Waived (if applicable): _____ CIP (yes or no): _____

Justification for Waiver _____

Justification for / Description of Transfer:
To appropriate funding for a grant from the Hetzel Family Fund. This is a two year grant, beginning in October 01, 2022 and ending on 09/28/2024 at \$33,250 total for both years. Funding will go toward the Battery Behavior Program for Duval County Teen Court. This program will help Teen Court involved youth who have received civil citations for misdemeanor battery and domestic battery charges. This program will use the funds to develop, implement, and facilitate a comprehensive, evidence-based treatment program and curriculum for the participating youths. No City match required.

Net Amount Appropriated and/or Transferred: \$33,250.00 * This element of the account string is titled project but it houses both projects and grants.

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

Date Rec'd.	Date Fwd.	Approved	Disapproved
8/14/22	8/16/22	Eve Janocko	
8/19/22	8/19/22	Carol Carver	
8/18/22	8-19-22		

Date of Action By Mayor: _____ Approved: _____
Division Chief: _____ Date Initiated: _____
Prepared By: _____ Carol Carver Phone Number: 904-255-2399
Initiated / Requested By (if other than Department): _____

TD / BT Number: BT 22-118

