

City of Jacksonville, Florida
Request for Budget Transfer Form

Department or Area Responsible for Contract / Compliance / Oversight: Fire and Rescue Department Countywide Council District(s): _____

Reversion of Funds: (if applicable) _____ Fund / Center / Account / Project * / Activity / Interfund / Future: FY27 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): No

Justification for Waiver: N/A

Justification for / Description of Transfer: Appropriate \$314,900 from the General Fund Operating CIP Debt Service Repayment activity ISA- Debt Management Fund Principal account to the FRFO Administrative Services - Fire Control - Specialized Equipment account to provide funding to the Jacksonville Fire and Rescue Department for the purchase and installation of baby boxes at 14 fire stations countywide.

Net Amount Appropriated and/or Transferred: \$314,900.00 * This element of the account string is titled project but it houses both projects and grants.

CITY COUNCIL
Requesting Council Member: Council Member Diamond CM's District: Council District 13
Requesting Council Member: _____ CM's District: _____
Prepared By: _____ Ordinance: _____

OFFICE OF THE MAYOR

BUDGET ORDINANCE TRANSFER DIRECTIVE

Date Rec'd.	Date Fwd.	Approved	Disapproved

Department Head _____ TD / BT Number: _____
Mayor's Office _____
Accounting Division _____
Budget Division _____

Date of Action By Mayor: _____ Approved: _____
Division Chief: _____ Date Initiated: _____
Prepared By: _____ Phone Number: _____
Initiated / Requested By (if other than Department): _____

Rev. B. F. H. April 7, 2026 - Finance

