

City of Jacksonville, Florida
Request for Budget Transfer Form

3
5-12-25

Court Administration
Department or Area Responsible for Contract / Compliance / Oversight

N/A
Council District(s)

Reversion of Funds:
(if applicable)

Fund / Center / Account / Project * / Activity / Interfund / Future

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:

A private donor, through the Community Foundation of Northeast Florida, is providing to the courts a three year grant, with the first year beginning March 28, 2025 through February 28, 2028. These funds will be used in the Duval County Teen Court to assist with the provision of mental health, life coaching skills, and drug treatment services. This grant will also help cover the gap in funding to provide these critical services. Staffing will be provided through the current contracted staff members. No City match required.

Net Amount Appropriated and/or Transferred:

\$35,000.00

* 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

Department Head	Date Rec'd.	Date Fwd.	Approved	Disapproved
Mayor's Office	4/17/25	4/17/25	<i>Site Jernoch</i>	
Accounting Division	4-18-25	7/18/25	<i>James Bowling</i>	
Budget Division	4-17-25	4-18-25	<i>Stacy Onda</i>	

Date of Action By Mayor: MAY 12 2025

Approved:

Division Chief:

Date Initiated:

Prepared By:

Carol Carver

Phone Number:

904-255-2399

Initiated / Requested By (if other than Department):

APPROVED BY:
MAYOR'S BUDGET
REVIEW COMMITTEE

TD / BT Number: BT25-080

DATE MAY 12 2025

Donna Deegan

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Budget Officer Initials

Total: \$35,000.00

2.

35,000

Total: \$33,250.00

Exhibit 1