3
5-27-25

City of Jacksonville, Florida
Request for Budget Transfer Form

Mayor's Office

Department or Area Responsible for Contract / Compliance / Oversight

Council District(s)

Reversion of Funds: _____ (if applicable)
Fund / Center / Account / Project * / Activity / Interfund / Future

N/A
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

Justification for / Description of Transfer:

Appropriating $1,267,800 to fund the 3 month gap in programs to improve access to care through a telehealth safety net ($375,000); increase the number of 988 crisis counselors ($36,000); increase community health workers for Northeast Florida Healthy Start Coalition ($46,800) and to decrease elderly food insecurity ($810,000).

Net Amount Appropriated and/or Transferred: $1,267,800.00

* 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

TD / BT Number: BT25-100

	Date Rec'd.	Date Fwd.	Approved	Disapproved
Department Head			Karen Bowling	
Mayor's Office				
Accounting Division	5-28-25	5/28/25	a/d. Sand	
Budget Division	5-28-25	5-29-25		

Date of Action By Mayor: MAY 27 2025

Approved: Donna Deegan

Division Chief: Joe Inderhees

Prepared By: Sunil Joshi

Date Initiated: 05/19/2025

Phone Number: 904-708-2673

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

APPROVED BY MAYOR'S BUDGET REVIEW COMMITTEE
DATE MAY 27 2025

Exhibit 1
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Budget Transfer Line Item Detail

* This element of the account string is titled project but it houses both projects and grants.

Budget Office approval does not confirm: 1) whether or not a grant requires a new 1Cloud grant number 2) the availability of prior-year revenue 3) the available fund balance in a non-all-years fund 4) the use of fund balance appropriations in all-years funds.

_____ Budget Officer Initials

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

Total: $1,267,800.00

Rev Exp	Fund Title	Activity / Grant / Project Title	Line Item / Account Title	Amount	Accounting Codes						
					Fund	Center	Account	Project *	Activity	Interfund	Future
Rev	General Fund Operating	Transfer From JIA CRA	Interfund Transfer In	$1,267,800.00	00111	191040	381910	000000	00000000	10804	0000000

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

Total: $1,267,800.00

Rev Exp	Fund Title	Activity / Grant / Project Title	Line Item / Account Title	Amount	Accounting Codes						
					Fund	Center	Account	Project *	Activity	Interfund	Future
Exp	General Fund Operating	Elderly Food Insecurity	Other Professional Services	$810,000.00	00111	162101	531090	000000	00001350	00000	0000000
Exp	General Fund Operating	Infant Mortality	Subsidies & Contributions To Private Org	$46,800.00	00111	194016	582001	000000	00002066	00000	0000000
Exp	General Fund Operating	Telehealth Safety Net / Healthlink Jax	Other Professional Services	$375,000.00	00111	194016	531090	000000	00002067	00000	0000000
Exp	General Fund Operating	988 Crisis Counseling Call Center	Subsidies & Contributions To Private Org	$36,000.00	00111	194016	582001	000000	00002068	00000	0000000

Related legislaiton 2023-847 and 2023-807