

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

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

All  
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):     No    

Justification for Waiver

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**Justification for / Description of Transfer:**

To appropriate \$250,000 from Social Services General Assistance and \$250,000 from the General Fund/General Services District Fund Balance to reimburse JEA for assisting customers who are facing disconnection of their electric, water and sewer services. The City would reimburse JEA \$50 per customer which is the amount needed to allow the utilities to not be cut-off. Customers who are eligible for the \$50 credit to be paid by the City would include those who are already participating in the JEAs prepayment plan program, have failed to continue those payments and have contacted JEA to reestablish payments going forward.

Net Amount Appropriated and/or Transferred:     \$500,000.00    

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

**CITY COUNCIL**

Requesting Council Member:     CM Garrett Dennis    

CM's District:     9    

Requesting Council Member: \_\_\_\_\_

CM's District: \_\_\_\_\_

Prepared By: \_\_\_\_\_

Ordinance: \_\_\_\_\_

**OFFICE OF THE MAYOR**

BUDGET ORDINANCE     TRANSFER DIRECTIVE

TD / BT Number: \_\_\_\_\_

	Date Rec'd.	Date Fwd.	Approved	Disapproved
Department Head				
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): \_\_\_\_\_

