

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

Division of Grants and Contract Compliance
Department or Area Responsible for Contract / Compliance / Oversight

N/A
Council District(s)

Fiscal Yr(s) of carry over (all-years funds do not require a carryover)

2023-2024

CIP (yes or no):

No

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

N/A

Section of Code Being Waived (if applicable): _____
Justification for Waiver

118.117

Imperfect People Center, Inc. is best suited to provide the program.

Justification for / Description of Transfer:
Appropriation of \$5,000 from a designated contingency for the Jacksonville Urban League to provide a grant to Imperfect People Center, Inc. for a Health and Awareness Workshop program.

wand amount Appropriated and/or Transferred: \$5,000.00

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

CITY COUNCIL

Requesting Council Member: CM Johnson CM's District: CD 14

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
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): _____

TD / BT Number: _____

