

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

Office of Economic Development
Department or Area Responsible for Contract / Compliance / Oversight

Reversion of Funds: 00117 Fund / Center / Account / Project / Activity / Interfund / Future

(if applicable) Section of Code Being Waived (if applicable): N/A

Justification for Waiver: Not applicable

Justification for / Description of Transfer: This request is to transfer \$25,000 to fund a grant to the Overflow Health Alliance for their Making Ends Meet facility to help address Food Deserts within NW Jacksonville.

Net Amount Appropriated and/or Transferred: \$25,000.00

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

CITY COUNCIL

Requesting Council Member: _____

Requesting Council Member: _____

Prepared By: _____

CM's District: _____

CM's District: _____

Ordinance: _____

OFFICE OF THE MAYOR

BUDGET ORDINANCE TRANSFER DIRECTIVE

Date Rec'd.	Date Forw.	Approved	Disapproved
8-11-21	8/21/21	<i>[Signature]</i>	
8-17-21	8/18/21	<i>[Signature]</i>	
8-16-21	8/17/21	<i>[Signature]</i>	

Date of Action By Mayor: _____

Approved: *[Signature]*

TD / BT Number: BT21-125

Division Chief: Kirk Wendland

Prepared By: Wendy Khan

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

Date Initiated: _____

Phone Number: 904-255-5448

APPROVED BY:
MAYOR'S BUDGET
REVIEW COMMITTEE
AUG 9 2021
DATE _____

Budget Transfer Line Item Detail

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

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

Rev Exp	Fund Title	Activity / Grant / Project Title	Line Item / Account Title	Amount	Accounting Codes							
					Fund	Center	Account	Project *	Activity	Interfund	Future	
EXP	Northwest JEDC Fund <i>OED</i>	EDED OED Special Initiatives - Industry Development / Supermarket Incentive Program	Professional Services	\$25,000.00	00117	105102	531090	000000	00000935	00000	00000000	
				Total:	\$25,000.00							

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

Rev Exp	Fund Title	Activity / Grant / Project Title	Line Item / Account Title	Amount	Accounting Codes							
					Fund	Center	Account	Project *	Activity	Interfund	Future	
EXP	Northwest JEDC Fund <i>OED</i>	EDED OED Special Initiatives - Industry Development / Overflow Health Alliance Grant	Subsidies & Contributions to Private Org	\$25,000.00	00117	105102	582001	000000	00000935	00000	00000000	
				Total:	\$25,000.00							