

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

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

_____ Council District(s)

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

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

118.107

Justification for Waiver
Section 118.107 is being waived because Regional Food Bank of Northeast Florida, Inc. (dba Feeding Northeast Florida) is dedicated to addressing food insecurity in Duval County.

Justification for / Description of Transfer:
Appropriates \$152,362 from the designated Special Council Contingency for the 2024/25 Council Strategic Plan to fund a grant to Regional Food Bank of Northeast Florida, Inc. (dba Feeding Northeast Florida) for capital improvements at their Jacksonville facility.

Net Amount Appropriated and/or Transferred: _____ \$152,362.00

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

CITY COUNCIL

Requesting Council Member: _____ CM Salem

Requesting Council Member: _____

Prepared By: _____

CM's District: _____ At Large Group 2

CM's District: _____

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): _____

