

City of Jacksonville, Florida
Request for Budget Transfer Form

Department or Area Responsible for Contract / Compliance / Oversight: Fire and Rescue

Council District(s): NA

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

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

Section of Code Being Waived (if applicable): NA

CIP (yes or no): No

Justification for Waiver: NA

Justification for / Description of Transfer:

Authorize grant awarded from the Department of Children & Families to purchase a rip current simulator to provide water safety training to emergency staff and community education on what to do if caught in a rip current. Grant begins March 23, 2026 and ends June 30, 2026. No matching funds are required.

Net Amount Appropriated and/or Transferred: \$13,900.00

* 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: BT 26-064

Date Rec'd.	Date Fwd.	Approved	Disapproved
	<u>4/6/26</u>	<u>[Signature]</u>	
	<u>4-9-26</u>	<u>[Signature]</u>	
	<u>4-8-26</u>	<u>[Signature]</u>	

Date of Action By Mayor: APR 27 2026

Approved: [Signature]

Division Chief: Molesha Cooke

Date Initiated: _____

Prepared By: April Mitchell

Phone Number: x3303

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

APPROVED BY: _____
MAYOR'S BUDGET REVIEW COMMITTEE
DATE: APR 27 2026

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4/27/26

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; whether or not a grant requires a new 1Cloud grant number nor the availability or use of prior-year revenue and/or the use of fund balance appropriations in all-years subfunds.

_____ Budget Officer Initials

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	Fund	Center	Account	Accounting Codes			
								Project *	Activity	Interfund	Future
REV	Emergency Medical Services	Water Safety - Rip Current Simulator	Dept of Children & Family Services	\$13,900.00	10601	125001	334692	011282	00000000	00000	0000000
Total:				\$13,900.00							

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	Fund	Center	Account	Accounting Codes			
								Project *	Activity	Interfund	Future
EXP	Emergency Medical Services	Water Safety - Rip Current Simulator	Employee Training Expenses	\$1,150.00	10601	125001	555001	011282	00000000	00000	0000000
EXP	Emergency Medical Services	Water Safety - Rip Current Simulator	Specialized Equipment	\$12,750.00	10601	125001	564290	011282	00000000	00000	0000000
Total:				\$13,900.00							