

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

Finance and Administration Department - Grants and Contract Compliance Division \_\_\_\_\_ N/A  
 Department or Area Responsible for Contract / Compliance / Oversight \_\_\_\_\_ Council District(s)

Reversion of Funds: \_\_\_\_\_ N/A  
 (if applicable) Fund / Center / Account / Project \* / Activity / Interfund / Future \_\_\_\_\_ Fiscal Yr(s) of carry over (all-years funds do not require a carryover) 11528 is All Years

Section of Code Being Waived (if applicable): \_\_\_\_\_ CIP (yes or no): No

Justification for Waiver \_\_\_\_\_

Justification for / Description of Transfer: \_\_\_\_\_  
 To transfer available funding from the Mental Health Offender Program (MHOP) General Fund activity to the MHOP Trust Fund (Fund 11528).

Net Amount Appropriated and/or Transferred: \$106,613.72

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

**CITY COUNCIL**

Requesting Council Member: \_\_\_\_\_ CVP Salem CM's District: At Large - Group 2  
 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				

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

Date of Action By Mayor: \_\_\_\_\_ Approved: \_\_\_\_\_  
 Division Chief: \_\_\_\_\_ Date Initiated: \_\_\_\_\_  
 Prepared By: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
 Initiated / Requested By (if other than Department): \_\_\_\_\_

**Budget Transfer Line Item Detail**

\* This element of the account string is titled 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	Fund	Center	Accounting Codes							
							Account	Project*	Activity	Interfund	Future			
				Total: \$213,227.44										
Exp	General Fund - General Services District	JXSF Citywide Mental Health - Mental Health Offender Program	Contractual Services	\$54,797.72	00111	191024	534100	000000	00001682	000000				
Exp	General Fund - General Services District	COCI Circuit Court-Judicial Support - Mental Health Offender Program	Contractual Services	\$6,816.00	00111	413001	534100	000000	00001682	000000				
Exp	General Fund - General Services District	SASA State Attorney - Mental Health Offender Program	Contractual Services	\$45,000.00	00111	900001	534100	000000	00001682	000000				
Rev	General Trust & Agency	Mental Health Offender Program	Interfund - Transfer In from General Fund - GSD	\$106,613.72	11528	191040	381910	000000	00001682	00111				

**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	Accounting Codes							
							Account	Project*	Activity	Interfund	Future			
				Total: \$213,227.44										
Exp	General Fund - General Services District	Mental Health Offender Program	Interfund - Transfer Out to General Trust & Agency	\$106,613.72	00111	191040	591910	000000	00001682	11528				
Exp	General Trust & Agency	JXSF Citywide Mental Health - Mental Health Offender Program	Contractual Services	\$106,613.72	11528	191024	534100	000000	00001682	000000				