

11/2

(3)
2-12-24

City of Jacksonville, Florida
Request for Budget Transfer Form

Reversion of Funds: _____
(if applicable)

Fund / Center / Account / Project * / Activity / Interfund / Future

Section of Code Being Waived (if applicable): _____

Justification for Waiver

Department or Area Responsible for Contract / Compliance / Oversight

Mayor's Office

Council District(s)

N/A

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

CIP (yes or no): _____ No

Justification for / Description of Transfer:

Transfer funding to establish Central Services Office of Director salary and benefit accounts. Related RC24-085.

Net Amount Appropriated and/or Transferred: \$91,261.00

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 Fwd.	Approved	Disapproved
2/8/24	2/8/24	<i>Alanna Boulton</i>	
2/12/24	2/13/24	<i>Alanna Boulton</i>	
2-8-24	2-8-24	<i>Alanna Boulton</i>	

Department Head _____

Mayor's Office _____

Accounting Division _____

Budget Division _____

Date of Action By Mayor: FEB 12 2024

Division Chief: Angela Moyer

Prepared By: Angela Moyer

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

Approved: *Donna Deegan*

Date Initiated: 2/8/24

Phone Number: _____

TD / BT Number: BT24-071

APPROVED BY: _____

MAYOR'S BUDGET REVIEW COMMITTEE

FEB 12 2024

DATE

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	Project *	Activity	Interfund	Future
Total:				\$91,261.00	Accounting Codes						
Exp	General Fund GSD	Library	Permanent and Probationary Salaries	\$76,752.00	00111	185102	512010	000000	000000000	00000	0000000
Exp	General Fund GSD	Library	Medicare Tax	\$1,113.00	00111	185102	521020	000000	000000000	00000	0000000
Exp	General Fund GSD	Library	Disability Trust Fund-ER	\$230.00	00111	185102	522070	000000	000000000	00000	0000000
Exp	General Fund GSD	Library	GEPP Defined Contribution DC-ER	\$8,980.00	00111	185102	522130	000000	000000000	00000	0000000
Exp	General Fund GSD	Library	Group Life Insurance	\$272.00	00111	185102	523030	000000	000000000	00000	0000000
Exp	General Fund GSD	Library	Group Hospitalization Insurance	\$3,914.00	00111	185102	523040	000000	000000000	00000	0000000

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	General Fund GSD	Central Services Office of Director	Permanent and Probationary Salaries	\$76,752.00	00111	111025	512010	000000	00000000	00000	0000000
Exp	General Fund GSD	Central Services Office of Director	Medicare Tax	\$1,113.00	00111	111025	521020	000000	00000000	00000	0000000
Exp	General Fund GSD	Central Services Office of Director	Disability Trust Fund-ER	\$230.00	00111	111025	522070	000000	00000000	00000	0000000
Exp	General Fund GSD	Central Services Office of Director	GEPP Defined Contribution DC-ER	\$8,980.00	00111	111025	522130	000000	00000000	00000	0000000
Exp	General Fund GSD	Central Services Office of Director	Group Life Insurance	\$272.00	00111	111025	523030	000000	00000000	00000	0000000
Exp	General Fund GSD	Central Services Office of Director	Group Hospitalization Insurance	\$3,914.00	00111	111025	523040	000000	00000000	00000	0000000
Total:				\$91,261.00							