

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

\_\_\_\_\_ Department or Area Responsible for Contract / Compliance / Oversight \_\_\_\_\_ Council District(s)

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

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

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

Justification for / Description of Transfer: \_\_\_\_\_

Appropriating program funding within the Opioid Settlement Fund - Special Council Contingency.

Net Amount Appropriated and/or Transferred: \_\_\_\_\_ \$4,768,478.00

\* 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

Date Rec'd.	Date Fwd.	Approved	Disapproved

Department Head \_\_\_\_\_ TD / BT Number: \_\_\_\_\_

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): \_\_\_\_\_

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 / Subobject Title	Amount	Fund	Accounting Codes							
						Center	Account	Project *	Activity	Interfund	Future		
				<b>Total:</b> \$4,768,478.00									
Exp	Opioid Settlement Fund	Fund Level Activity	Contingency	\$4,768,478	15111	191023	599100	000000	00001855	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 / Subobject Title	Amount	Fund	Accounting Codes							
						Center	Account	Project *	Activity	Interfund	Future		
				<b>Total:</b> \$4,768,478.00									
Exp	Opioid Settlement Fund	Fund Level Activity	Subsidies and Contributions to Private Organizations	\$4,768,478	15111	191023	582001	000000	00001855	00000	0000000		