

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

Sheriff's Office

Department or Area Responsible for Contract / Compliance / Oversight

CW

Council District(s)

Reversion of Funds:

(if applicable) Fund / Center / Account / Project * / Activity / Interfund / Future

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

Justification for Waiver

Justification for / Description of Transfer:

Appropriating \$100,000 from the Special Council Contingency to conduct a population study of the Duval County Jail.

Net Amount Appropriated and/or Transferred: \$100,000.00

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

CITY COUNCIL

Requesting Council Member: CM 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

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): _____

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.)

Total: \$100,000.00

Rev Exp	Fund Title	Activity / Grant / Project Title	Line Item / Account Title	Amount	Fund	Center	Account	Accounting Codes			
								Project *	Activity	Interfund	Future
EXP	General Fund Operating	Special Council Contingency	Contingency	\$100,000.00	00111	195001	599100	000000	00000906	00000	000000

TRANSFER TO: (Revenue line items in this area are being de-appropriated and expense line items are being appropriated.)

Total: \$100,000.00

Rev Exp	Fund Title	Activity / Grant / Project Title	Line Item / Account Title	Amount	Fund	Center	Account	Accounting Codes			
								Project *	Activity	Interfund	Future
Exp	General Fund Operating	Pre-Trial Operations	Contractual Services	\$100,000.00	00111	561102	534100	000000	00000000	00000	000000