

City of Jacksonville, Florida Request for Budget Transfer Form

Department or Area Responsible for Contract / Compliance / Oversight _____

N/A
Council District(s) _____

Reversion of Funds: _____ N/A _____
(if applicable) Subfund / Indexcode / Subobject / Project Prj-Dtl / Grant Grt-Dtl

No
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:

Transfer funding from the designated Council contingency for the City of Jacksonville's contribution to the Jacksonville Chamber of Commerce for FY19-20. Funding will be placed in Citywide Municipal Dues and Affiliations activity.

Total Amount Appropriated: _____ \$400,000.00 _____

CITY COUNCIL

Requesting Council Member: _____ Scott Wilson _____

CM's District: _____ 04 _____

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): _____

