

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

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Neighborhoods / Animal Care & Protective Services
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

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

Section of Code Being Waived (if applicable): N/A

CIP (yes or no): NO

Justification for Waiver

N/A

Justification for / Description of Transfer:

This BT will appropriate funds awarded to the City's Animal Care and Protective Services Division from Florida Animal Friend, Inc., which will be used to provide spay and neuter services to feral and resident owned free roaming cats/kittens within the community. The distribution of funds and the implementation of the grant will be through ACPS non-profit partners.

Total Amount Appropriated: \$25,000.00

CITY COUNCIL

Requesting Council Member: _____

CM's District: _____

Requesting Council Member: _____

CM's District: _____

Prepared By: _____

Ordinance: _____

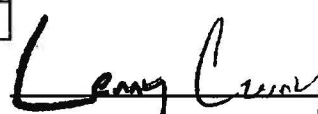
OFFICE OF THE MAYOR

BUDGET ORDINANCE TRANSFER DIRECTIVE

TD / BT Number: BT 20-021

	Date Rec'd.	Date Fwd.	Approved	Disapproved
Department Head	<u>10/1/19</u>	<u>10/7/19</u>		
Mayor's Office				
Accounting Division	<u>10/1/19</u>	<u>10/10/19</u>		
Budget Division	<u>10-7-19</u>			

Date of Action By Mayor: OCT 2 1 2019

Approved: 

Division Chief: Devron Cody, Chief

Date Initiated: 10/7/19

Prepared By: Daniel Nasr, Finance Manager

Phone Number: 255-8831

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

**APPROVED BY:
MAYOR'S BUDGET
REVIEW COMMITTEE**

DATE OCT 2 1 2019

