Exhibit 1

City of Jacksonville, Florida Request for Budget Transfer Form

		Citywide								
Department of	or Area Responsible for Cont	ract / Compliance /	Oversight			Council District(s)				
Reversion of Funds:										
(if applicable)	und / Center / Account / Pro	ject * / Activity / Inte	erfund / Future	n	Fiscal Yr(s) of ca	rry over (all-years funds do not req	uire a carryover)			
Section of Code Being Waived (if appl	icable):					CIP (yes or no):	No			
Justification for Waiver										
Waiver of Section 126.107(g), Part 1,				use of the	orofessional service	es of The Jacksonville Bar	Association,			
Inc. to implement the Eviction and Fore	eclosure Prevention Progra	am on benair of tr	ne City.							
Justification for / Description of Transfe	er:									
Transfer CARES Act funding to create	a new Eviction and Forec	losure Prevention	Program.							
Net Amount Appropriated and/or Transferred: \$5,300,000.00					* This element of the account string is titled project but it houses					
					both projects and g	rants.				
		CIT	COUNCIL							
B					ONE District					
Requesting Council Member:					CM's District:					
Requesting Council Member:					CM's District:					
Prepared By:					Ordinance:					
		OFFICE	OF THE MAYOR	₹						
X BUDGET ORDINA	NCE TRANSFER DIREC	CTIVE			TD / BT Number:	BT21-021				
Date Rec'd. Date	Fwd. Approve	d	Disapproved	11 - 1 -						
Department Head										
Mayor's Office										
Accounting Division										
Budget Division		8								
Date of Action By Mayor:			А	Approved: _						
Division Chief:					Date Initiated:					
Prepared By: Angela Moyer					Phone Number:					
Initiated / Requested By (if other than De	epartment):					=				
L										

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

			Tot	tal: \$5	,300,000.00	Accounting Codes						
Rev Exp	Fund Title	Activity / Grant / Project Title	Line Item / Account Title		Amount	Fund	Center	Account	Project *	Activity	Interfund	Future
	Emergency Incidents - EOC	Vystar Small Business Relief program	Miscellaneous Grants and Aids	\$5	5,000,000.00	10602	191473	583010	010008	00000000	00000	0000000
	Emergency Incidents - EOC	Testing and Other Health Needs	Contractual Services		\$300,000.00	10602	191477	534100	010008	00000000	00000	0000000

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

				\$5,300,000.00	Accounting Codes						
Rev Exp	Fund Title	Activity / Grant / Project Title	Line Item / Subobject Title	Amount	Fund	Center	Account	Project *	Activity	Interfund	Future
I EVN	Emergency Incidents - EOC		Subsidies and Contributions To Private Organization	\$5,300,000.00	10602	191490	582001	010008	00000000	00000	0000000