

2016

2015 FTR-079

FUND TRANSFER REQUEST FORM

AGENCY	Human Services Department	ORGANIZATION	Fund 2600	DATE	2/19/2016	
FTR:	160204-2016-10 adjust 2016 Safe Haven					
TRANSFER AMOUNT(S) FROM			FOR ACCOUNTING USE ONLY			
Amount in Whole \$\$	Account Title	Account Number (ORGN OBJT)	Budget Amount	Encumbered Amount	Expended Amount	Balance
1 \$2,648	SAFE HAVEN	CYFSUPRT 81055	126598	-	-	126598
2 (\$171)	SAFE HAVEN	CYF-ADM 81055	371	-	-	371
3						
4						
5						
6						
7						
8						
9						
10						
\$2,477 Transfer From Total						
TRANSFER AMOUNT(S) TO			FOR ACCOUNTING USE ONLY			
Amount in Whole \$\$	Account Title	Account Number	Budget Amount	Encumbered Amount	Expended Amount	Balance
1 (\$20,058)	SAFE HAVEN - DAIS	CYFCTDAI CZSHAA	23058	-	-	23058
2 \$29,566	SAFE HAVEN - CSS	CYFCTCSS CZSHAA	80,722	-	-	80,722
3 \$60	LIMITED TERM EMPLOYEE	CYFDSSIA AAYGAA	166740	-	23102	143,638
4 \$5	SOCIAL SECURITY	CYFDSSIA AAYPAA	855794	-	82,434	773,357
5 (\$6,925)	SAFE HAVEN - PROFESSIONAL	CYFCTCT CZSHAA	13125	-	-	13125
6 (\$171)	TRAVEL EXPENSE STAFF	CYF-ADM ABTTAA	348924	-	17622	331,302
7						
8						
9						
10						
\$2,477 Transfer To Total						
EXPLANATION: Increases and adjusts the 2016 budget to the actual allocation for the Safe Haven grant.			ACTION			
			Dept/Committee	Date	Approved	Denied
			Department Head	3/2/2016	L. Green	
			Oversight Committee			
			Controller	3/7/16		
			County Executive	3-11-16		
Finance Committee			Initial Request to be submitted to Controller for fund availability. The Department Head will assume responsibility for getting oversight committee approval before submitting request.			