## 2014 FTR-080

## 2012 FUND TRANSFER REQUEST FORM

AGENCY	Human Services Department	ORGANIZATION		Fund 2600		DATE	10/24/2014
FTR	141024-2014-31					•	
TRANSFER AMOUNT(S) FROM				FOR ACCOUNTING USE ONLY			
Amount in Whole \$\$	Account Title	Account Number (ORGN OBJT)		Budget Amount	Encumbered Amount	Expended Amount	Balance
	Drop in Shelter	EASHLPLT	DIESAA	50304		46112	4192
2							
3							
4							
5							
6							
7							
8 \$4,154	Transfer From Total						
TRANSFER AMOUNT(S) TO				FOR ACCOUNTING USE ONLY			
Amount in Whole \$\$	Account Title	Accour	nt Number	Budget Amount	Encumbered Amount	Expended Amount	Balance
1 \$4,154	Hospitality House	EAHMLPLT	EMHOAA	(new)	_		i <del></del> .
2							
3							
4							
5							
6							
7				0			
8 \$4,154 EXPLANATION:	Transfer To Total				ACTION		
			Dent/	Dept/Committee Date		Approved	Denied
This BAF transfers money from the Porchlight drop in shelter to the Porchlight Hospitality House shelter - (a new contract 11/1/2014-4/30/2015).			Department Head		Date	Apploved	Deffied
			Oversight Committee		12/2/14	HHW.	
			Controller		12/2/14	not	
			County Exec	utive	12-414	200	
			Finance Con		12/8/14	Pot=	
				Initial Request to be submitted to Controller for fund availability. The Department Head will assume responsibility for getting oversight committee approval before submitting request.			