## 2015 FUND TRANSFER REQUEST FORM

AGENC	Human Services Department	ORGANI	ORGANIZATION		Fund 2600		DATE 12/8/2014	
FTR	141208-2015-02							
TRANSFER AMOUNT(S) FROM				FOR ACCOUNTING USE ONLY				
Amount in Whole \$\$		Account Number (ORGN OBJT)		Budget Amount	Encumbered Amount	Expended Amount	Balance	
	Care Wisconsin (Transportation)	ACBADMIN	81370	197000	_	_	197000	
2								
3								
4								
5								
6								
7								
8 \$28,000	Transfer From Total							
TRANSFER AMOUNT(S) TO				F	FOR ACCOUNTING USE ONLY			
Amount in Whole	Account Title	Account	Number	Budget Amount	Encumbered Amount	Expended Amount	Balance	
	CAPITOL EXPRESS - CARE WI GRP RIDES	ACBSTCEX	TACWAA	43000	_		43000	
2 \$3,00	TRANSIT SOLUTION - CARE WI GRP RIDES	ACBSTTRS	TACWAA	84000		_	84000	
3 \$10,00	WE CARE - CARE WI GRP RIDES	ACBSTWCT	TACWAA	70000			70000	
4								
5								
6								
7								
	0 Transfer To Total				AND THE RESERVE AND THE RESERV			
EXPLANATION:				/ACTION: Approved G.P. Fostal 17/2014  Dept/Committee Date Approved Denied				
Care Wisconsin purchases adult day care related transportation services from					Date	Approved	Denied	
DULIEN AND THE 7010 AMOUNT WILLDE 3/A DUD HISHEL HIAD THE 319/2000 III HIE ZUID E			Department I		11-1-	1141		
Adopted Rudget This arrangement enables the adult day care fides for Lare			Oversight Co	mmittee	1/15/15	HHI		
W			County Eyes	utivo	1	/		
for adult day care participants who are funded by DCDHS.			County Executive Finance Committee		12.30-14	AUS: -		
ioi addit day can	participants who are randed by Debrio.			be submitted to Contro	ler for fund availability		ad will assume	
				getting oversight comm			as mill dooding	