

FUND TRANSFER REQUEST FORM

AGENCY Public Works	ORGANIZATION Highway & Transportation	DATE 12/21/17
---------------------	---------------------------------------	---------------

TRANSFER AMOUNT(S) FROM				FOR ACCOUNTING USE ONLY			
Amount in Whole \$\$	Account Title	Account Number	Budget Amount	Encumbered Amount	Expended Amount	Balance	
1	10,927.00	CTH V V – 151 TO T	HWCONCAP-59184	10,927.56	0	0	10,927.56
2	13,093.00	CTH Y - CULVERTS	HWCONCAP-59157	13,093.67	0	0	13,093.67
3							
4							
5							
6							
7							
6							

TRANSFER AMOUNT(S) TO				FOR ACCOUNTING USE ONLY			
Amount in Whole \$\$	Account Title	Account Number	Budget Amount	Encumbered Amount	Expended Amount	Balance	
1	24,020.00	CTH DD	HWCONCAP-59021	210,000.00	167,603.30	54,657.50	(12,260.80)
2							
3							

EXPLANATION	ACTION			
Transfer funds for additional costs on CTH DD project.	Dept/Committee	Date	Approved	Denied
	Oversight Committee			
	Controller			
	County Executive			
	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.				