2014 FUND TRANSFER REQUEST

				,	City of	The ad	EXPLA	10	9	8	7	6	5	4	ω	4	ω	2 -	4	Amou		10	9	8	7	6	5	4	ω	2	_1	Allion	•							
					City of Madison.	dition of fund	EXPLANATION:	\$40,000										\$#0,000	\$40 000	Amount in Whole \$\$		\$40,000								\$20,000	\$20,000	\$\$		FTR:	AGENCY					
					a for the new FOLD BOOK program. Accided is cell	The addition of funds for the new EATA ROOST program \$20,000 is being paid from the		Transfer To Total										Employment & maining	Employment & Training	Account Title	TRANSFER AMOUNT(S) TO	Transfer From Total								\$20,000 POS FSET Match 50/50	FSET Supplement Revenue	Account line	TRANSFER AMOUNT(S) FROM	FTR: 140729-2014-23	AGENCY Human Services Department					
Initial Request to I	Initial Request to be submi	County Executive	Controller	Oversight Committee	Depart													LOGINACIO I OLIVA	EASTRNETA FIJETAA	Account Number										EAEMPWW 81364	EAEMPWW 81362	OBJT)			ORGANIZATION					
Initial Department Head will assume initial Request to be submitted to Controller for fund availability. The Department Head will assume research littly for patting questions to committee approval before submitting request	mittee	tive		mmittee	lead	Dept/Committee												73004	2021	Budget Amount	FC									250.012	473,913	Amount	The said		Fund Zbuu					
ler for fund availability.		8-2114		8/18/14	8/1/2014	Date	Ž			, , , ,														1	Encumbered Amount	FOR ACCOUNTING USE ONLY									ı	, a spiller	Amount	FOR ACCOUNTING USE ONLY		
The Department Hea		M	1	har	7	Approved													av. (w)	21. 11.0	Expended Amount	ING USE ONI									115 729	290,467	Amount	ING USE ON		DAIE				
id will assume						Denied												10.000	37001	Balance	Υ								104 64	25C 1181	183,446	Dalaince	535		//29/2014					