FUND TRANSFER REQUEST FORM

| AC | SENCY Pu | blic Works | ATION H | ON Highway & Transportation | | | | | | DATE | 2/15/18 | |
|--|------------------------------------|--------------------|------------------|-----------------------------|--|-------------------------|--------------------------|--------------------------------|---------|----------------------------|------------------------------|--------------|
| TRANSFER AMOUNT(S) FROM | | | | | FOR ACCOUNTING USE ONLY | | | | | | | ILY |
| Amount in Account Title Whole \$\$ | | | A | Account Number | | Budge Amour | | | | Expended Amount | | Balance |
| 1 | 64,000.00 | GRADERS | | HWFLTFAC-57548 | | 79,04 | 17.19 | 0 | | | 0 | 79,047.19 |
| 2 | 79,306.46 | LOADERS | | HWFLTFAC-58858 | | 236,00 | 00.00 | 92,109.00 | | | 0 | 143,891.00 |
| 3 | 4,693.54 | ROUTE OPTIMIZATION | | HWFLTFAC-58468 | | 4,69 | 93.54 0 | | 0 | | 0 | 4,693.54 |
| 4 | | | | | | | | | | | | |
| 5 | | | | | | | | | | | | |
| TRANSFER AMOUNT(S) TO | | | | | | FOR ACCOUNTING USE ONLY | | | | | | ILY |
| | Amount in Account Title Whole \$\$ | | A | Account Number | | Budge Amour | | | | | ended nount | Balance |
| 1 | 35,000.00 | 2 CREW TRUCKS | HW | FLTFAC-5 | 7309 | 325,91 | 25,915.00 | | 0 | | 0 | 325,915.00 |
| 2 | 3,000.00 | SEMI TRACTOR | HW | /FLTFAC-5 | 8043 | 3,59 | 94.52 | 0 | | | 0 | 3,594.52 |
| 3 | 3,000.00 | HYDRAULIC LIFT | HW | /FLTFAC-5 | 8108 | 45,00 | 45,000.00 | | 0 | | 0 | 45,000.00 |
| 4 | 5,000.00 | STREET BROOM | HW | FLTFAC-5 | 8704 | 60,000.00 | | 0 | | | 0 | 60,000.00 |
| 5 | 60,000.00 | 6 PATROL TRUCKS | HW | FLTFAC-5 | 8853 | 2,185,070.30 | | 0 | | | 0 | 2,185,070.30 |
| 6 | 12,000.00 | EMERGENCY/INNOVAT | IVE HW | FLTFAC-5 | 8866 | 65,27 | 65,276.27 | | 0 | | 0 | 65,276.27 |
| 7 | 30,000.00 | BRINE SYSTEM | HW | FLTFAC-5 | 9004 | 5,718.49 | | 0 | | | 0 | 5,718.49 |
| EXPLANATION | | | | | ACTION | | | | | | | |
| Transfer funds for additional equipment costs. | | | | | Dept/Committee | | Da | Date A | | pproved | | Denied |
| | | | | | Oversight Committee | | | | | | | |
| | | | | | Controller | | | | | | | |
| | | | | | County Executive | | | | | | | |
| | | | | | Finance Committee | | | | | | | |
| | | | Initial assur | Request to me respons | be submitted the best of the submitted the submi | o Contro | oller for fu ght comm | ınd availabili ittee approv | ity. Th | e Departme re submittir | ent Head will ng request. | |