

FUND TRANSFER REQUEST FORM

	AGENCY Human Services Department	ORGANIZATION Fund 2600	DATE 11/18/2015		
	FTR: 151119-2015-43 DA transfer to JFF				
TRANSFER AMOUNT(S) FROM		FOR ACCOUNTING USE ONLY			
Amount in Whole \$\$	Account Title	Account Number (ORGN OBJT)	Budget Amount Encumbered Amount Expended Amount Balance		
1 \$5,000	Fees	CYFSUPRT 81531	0 0 5000.00 5000.00		
2					
3					
4					
5					
6					
7					
8					
9					
10					
\$5,000 Transfer From Total					
TRANSFER AMOUNT(S) TO		FOR ACCOUNTING USE ONLY			
Amount in Whole \$\$	Account Title	Account Number	Budget Amount Encumbered Amount Expended Amount Balance		
1 \$5,000	JFF Initiative	CYFJFFAC FMFPAA	0 0 1179 (1179)		
2					
3					
4					
5					
6					
7					
8					
9					
10					
\$5,000 Transfer To Total					
EXPLANATION: Recognizes \$5,000 given from the DA's office for JFF to use for victims of crime. Unexpended or unearned monies should be carried forward into 2016.		ACTION			
		Dept/Committee	Date	Approved	Denied
		Department Head	11-20-15	<i>[Signature]</i>	
		Oversight Committee			
		County Executive	11/30/15	<i>[Signature]</i>	
Finance Committee	12-2-15	<i>[Signature]</i>			
Initial Request to be submitted to Controller for fund availability. The Department Head will assume responsibility for getting oversight committee approval before submitting request.					