
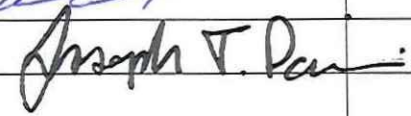


FUND TRANSFER REQUEST FORM

2018

AGENCY ADMIN		ORGANIZATION CONSOLIDATED FOODS				DATE 2/6/2018	
TRANSFER AMOUNT(S) FROM				FOR ACCOUNTING USE ONLY			
Amount in Whole \$\$	Account Title	Account Number	Budget Amount	Encumbered Amount	Actual Amount	Balance	
1	3,800	JOINT REPLACEMENT	CFSADM 58037	100,000	1,633	22,042	76,325
2							
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	Actual Amount	Balance	
1	3,800	VEHICLE REPLACEMENT	CFSADM 58926	38,000	0	0	38,000
2							
3							
EXPLANATION			ACTION				
CFS Van bid came in \$3,800 more than budgeted. Funds in the Joint Replacement project account are available to cover the additional costs of the van.			Dept/Committee	Date	Approved	Denied	
			Oversight Committee				
			Controller	2/7/18			
			County Executive	2-8-18			
			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.							

2017 FTR-48