

2016 FUND TRANSFER REQUEST FORM

2016 FTR-10

	AGENCY	Human Services Department	ORGANIZATION	Fund 2600	DATE	4/19/2016			
	FTR:	160418-2016-14 Nutrition Donations Incr.							
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	\$15,000	Nutrition Donations	ACBADMIN 81535	45240	—	116.009	336.401		
2									
3									
4									
5									
6									
7									
8									
9									
10	\$15,000	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	\$15,000	Aging TBD	ACBCLTBD TBDAAA	1000	—	—	1000		
2									
3									
4									
3									
4									
5									
6									
7									
8									
9									
10	\$15,000	Transfer To Total							
EXPLANATION: This FTR increases Nutrition Donations revenue for 2016. In 2015, we exceeded the budgeted amount by \$15,000. In 2016, there will be additional donations from sites that were only open for part of 2015 and will be open all of 2016 collecting donations. This will then be distributed to catering contracts that will over utilize later in the year.				ACTION					
				Dept/Committee	Date	Approved	Denied		
				Department Head	5/3/2016	L. Green			
				Oversight Committee					
				Controller	5/9/16	<i>[Signature]</i>			
				County Executive	5-11-16	<i>[Signature]</i>			
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.					