

## 2015 FUND TRANSFER REQUEST FORM

2014 FTR-097

	AGENCY Human Services Department	ORGANIZATION Fund 2600	DATE 12/8/2014			
	FTR: 141208-2015-01					
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	\$30,100 MA CRS Revenue	ACFMHLTH 81051	710 221	-	-	710 221
2						
3						
4						
5						
6						
7						
8	\$30,100 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	\$9,500 CHR - SUPPORTED EMPLMT	ACFSECSU SESEAA	159 817	-	-	159 817
2	\$20,600 CHR - FACILITY BASED WORK	ACFWRCSU PVFBAA	110 380	-	-	110 380
3						
4						
5						
6						
7						
8	\$30,100 Transfer To Total					
EXPLANATION: Increases the existing MA CRS revenue line by \$30,100 to be earned by the Chrysalis contract Supported Employment and Facility Based Work programs.			ACTION: Approved by G.P. Foster 12/15/2015			
			Dept/Committee	Date	Approved	Denied
			Department Head	12/15/2014	<i>Lynn Green</i>	
			Oversight Committee	1/15/15	<i>H...</i>	
			Controller	12/22/14	<i>[Signature]</i>	
			County Executive	12-30-14	<i>[Signature]</i>	
			Finance Committee	1/26/15	<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.						