

# FUND TRANSFER REQUEST FORM

	AGENCY	Human Services Department	ORGANIZATION	Fund 2600	DATE	1/8/2015	
	FTR:	150109-2015-09					
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	Donations	CYFJDSCT 81560				
2							
3							
4							
5							
6							
7							
8							
9							
10							
<b>\$5,000 Transfer From Total</b>							
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 Discretionary	CYFJFFAC CPSDAA				
2							
3							
4							
5							
6							
7							
8							
9							
10							
<b>\$5,000 Transfer To Total</b>							
EXPLANATION: Accepts MG&E Foundation's one-time contribution for utility support to clients in need throughout the community.				ACTION: APPROVED G. P. Foster 1/12/2015			
				Dept/Committee	Date	Approved	Denied
				Department Head	1-12-15	<i>Lynn Green</i>	
				Oversight Committee			
				Controller			
				County Executive			
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.			