

2014 FTR - 08

2014 FUND TRANSFER REQUEST FORM

	AGENCY	Human Services Department	ORGANIZATION	Fund 2600	DATE	11/19/2014	
	FTR:	141119-2014-34					
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	\$50,000	Emergency Shelter	EAHMLPLT EMSHAA	226,121	-	85,819	140,302
2							
3							
4							
5							
6							
7							
8	\$50,000	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	\$50,000	Hospitality House <i>NEW</i>	EAHMLPLT EMHOAA	-	-	-	-
2							
3							
4							
5							
6							
7							
8	\$50,000	Transfer To Total					
EXPLANATION: This BAF transfers money from the Porchlight line (day resource center funds) to a the newly created line/contract with Porchlight (term 11/1/2014-4/30/2015) for Hospitality House				ACTION			
				Dept/Committee	Date	Approved	Denied
				Department Head			
				Oversight Committee	12/2/14	<i>HHSW</i>	
				Controller	12/2/14	<i>[Signature]</i>	
				County Executive	12-4-14	<i>[Signature]</i>	
Finance Committee	12/8/14	<i>[Signature]</i>					
<small>Initial Request to be submitted to Controller for fund availability. The Department Head will assume responsibility for getting oversight committee approval before submitting request.</small>							