

2017 FUND TRANSFER REQUEST FORM

	AGENCY	Human Services Department	ORGANIZATION	Fund 2600	DATE	11/8/2017		
	FTR:	171108-2017-13 Aging Revenue Increase						
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								
2	\$10,075	Title III B	ACBADMIN 81544					
3	\$17,755	Title III E	ACBADMIN 81552					
4	\$4,289	Title III C -2	ACBADMIN 81534					
5								
6								
7								
8								
9								
10	\$32,119	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	\$8,125	RSVP Volunteer Program	ACBAARSV ORVPAA					
2	\$1,950	Cultural Diversity	ACBAANEC ORDIAA					
3	\$17,755	Caregiver Support	ACBWRTBD NFCSAA					
4	\$4,289	Aging TBD	ACBCLTBD TBDAAA					
3								
4								
5								
6								
7								
8								
9								
10	\$32,119	Transfer To Total						

EXPLANATION:

To add additional funding per the State/County contract to the budget. This is one time additional III B and IIIE funding that must be expensed by currently funded programs by year end. C2 money will be used to offset deficits in catering contracts due to utilization.

ACTION			
Dept/Committee	Date	Approved	Denied
Department Head	11/9/2017	<i>L. 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.			