2018 FUND TRANSFER REQUEST

| | AGENCY | Human Services Department | ORGAN | IIZATION | Fund 2600 | | DATE | 3/12/2018 |
|-------------------------------|---|--|-----------------|------------|-------------------------|------------|------------|-----------|
| | FTR: | 180312-2018 - 05 Opiate Treatment Revenue Increa | ise | | | | | |
| | TRANSFER AMOUNT(S) FROM | | | | FOR ACCOUNTING USE ONLY | | | |
| Amount in Whole | | Account Title | Account Nu | mber (ORGN | Budget | Encumbered | Expended | Balance |
| | \$\$ | | OI | BJT) | Amount | Amount | Amount | |
| 1 | | | | | | | | |
| 2 | \$14,430 | OJA Opiate Treatment Services | ACICTRMT | 81565 | | | | |
| 3 | | | | | | | | |
| 4 | | | | | | | | |
| 5 | | | | | | | | |
| 6 7 | | | | | | | | |
| 8 | | | | | | | | |
| 9 | | | | | | | | |
| 10 | \$14.430 | Transfer From Total | | | | | | |
| TRANSFER AMOUNT(S) TO | | | | | FC | OR ACCOUNT | ING USE ON | Υ |
| Amount in Whole Account Title | | Accoun | t Number | | | | Balance | |
| 7 11110 | \$\$ | Account The | 7.000ant rambor | | Amount | Amount | Amount | Balarioo |
| 1 | | Jail Opiate Outreach | ACICLARW | ORHSAA | | | | |
| 2 | \$12,515 | Jail Opiate Project | ACICLMHC | CZOPAA | | | | |
| 3 | | | | | | | | |
| 4 | | | | | | | | |
| 3 | | | | | | | | |
| 4 | | | | | | | | |
| 5 6 | | | | | | | | |
| 7 | | | | | | | | |
| 8 | | | | | | | | |
| 9 | | | | | | | | |
| 10 | \$14.430 | Transfer To Total | | | | | | |
| 10 | | | | | | | | |
| | | | | Dept/C | Dept/Committee Date | | Approved | Denied |
| | DCDHS budgeted \$15,570 in DOJ Residential Substance Abuse Treatment program revenue. The actual 2018 revenue will be \$30,000, which is \$14,430 more than | | | | | | L Green | 2011100 |

DCDHS budgeted \$15,570 in DOJ Residential Substance Abuse Treatment program revenue. The actual 2018 revenue will be \$30,000, which is \$14,430 more than budgeted. The additional funds will go to Jail Opiate programs with Aids Resource Center and Journey Mental Health Center, Inc.

| ACTION | | | | | | | | |
|---------------------|-----------|----------|--------|--|--|--|--|--|
| Dept/Committee | Date | Approved | Denied | | | | | |
| Department Head | 3/14/2018 | L Green | | | | | | |
| 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.