

FY20B  
9/1/2013  
Period 12

Updated 9/13/13

Group: 5203

Entered: C.H. 9/12/13

**CITY OF OVIEDO  
BUDGET TRANSFER/AMENDMENT DETAIL FORM**

Department/Division 1201 Human Resources

Dept. Authorization *Comm. Call*

Account Number	Fund / Account Description	Funds to be transferred From:	Funds to be transferred To:
001-1201-512-54-20	Training	\$ 155 ✓	
001-1201-512-54-99	Other Books, Pubs, Subs		\$ 155
001-1201-512-31-99	Professional Services	\$ 390 ✓	
001-1201-512-13-20	Temporary Salary & Wages		\$ 390
<b>TOTAL</b>		<b>\$545</b>	<b>\$545</b>
-----Must Balance----- (Do not use cents)			

**Notes / Comments**

Note as to why the transfer needs to be made, reference all documentation including resolutions or ordinances.

<b>Approved By:</b> Check Appropriate Box <i>OK DW 9/16</i>	City Council: Exceeds \$35,000	Informational Note Only:	Resolution #
	City Manager: Less than \$35,000	Programs/Capital not budgeted	Approval Date
	Mgt Srvc Director: Internal	must be presented to Council	BA # - 2013- <i>065</i>

*Robin R. Hayes 9/9/13*