

FY14-15

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

For Accounting use:

Fiscal Year: FY14/15	Accounting Approval: _____
Period: _____	Entered By: _____
Transaction Date: _____	Group Number: _____

Department/Division Management Services

Dept. Authorization _____

Account Number	Fund / Account Description	Increase	Decrease
001-1305-513.46-19 ✓	Repair and Maintenance/buildings	135 ✓	
001-1305-513.52-04 ✓	Operating Supplies/Small Tools	508 ✓	
001-1305-513.47-00 ✓	Financial & Admin./printing & binding ✓		-643 ✓
Count	TOTAL	\$643	-\$643
-----Must Balance----- (Do not use cents)			

Notes / Comments
move monies to cover cost of installing a run line for coffee pot and also a new refrigerator in break room

Approved By: Check Appropriate Box	City Council: Exceeds \$35,000	Informational Note Only: Programs/Capital not budgeted must be presented to Council	Resolution #
	City Manager: Less than \$35,000		Approval Date:
	Mgt Srvc Director: Internal	Signature: _____	Date Signed: _____

ok DW 9/29/15

Robert H. Hayes 10/1/15