

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

For Accounting use:

Fiscal Year: 2013/14 **Accounting Approval:** _____
Period: _____ 8 **Entered By:** _____
Transaction Date: _____ 5/8/2014 **Group Number:** _____

Department/Division Fire Rescue

Dept. Authorization * Open Fire Pos: Forced OT

Account Number	Fund / Account Description	Increase	Decrease
001-2201-522.12-10 ✓	Regular Salaries & Wages		\$ - 146,000 ✓
001-2201-522.14-00 ✓	Fire Control/Overtime	\$ 146,000	

Count

TOTAL **\$146,000** **\$146,000**
-----Must Balance-----
(Do not use cents)

Notes / Comments

As the result of various open fire positions throughout the first half of the year, additional overtime is needed above what was original budgeted for.

Approved By: Check Appropriate Box <u>OK DW 5/9</u>	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	[Date Signed: _____]	BA # - <u>2014 - 56</u>
	Signature: _____		

Robert Hayes
5/9/14