

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

For Accounting use:

Fiscal Year: 2014 Accounting Approval: _____
 Period: _____ Entered By: _____
 Transaction Date: _____ Group Number: _____

Department/Division Public Works - Utilities Administra 3300

Dept. Authorization Bobby Wyatt 

Account Number	Fund / Account Description	Increase	Decrease
401-3300-533.31-99	Professional Services/ Other Project # <u>14-020</u>	12,500	
401-9000-590.99-20	Reserve For Contingencies		-12,500

TOTAL **\$12,500** **-\$12,500**

Notes / Comments

Request to transfer funds from the Contingency account to this account to cover CEI Services for the WM relocation project at Mitchell Hammock Rd. and SR 426.

Approved By: Check Appropriate Box	<input type="checkbox"/>	City Council: Exceeds \$35,000	Informational Note Only: Programs/Capital not budgeted must be presented to Council	Resolution #
	<input checked="" type="checkbox"/>	City Manager: Less than \$35,000		Approval Date: 08/07/2014
	<input type="checkbox"/>	Mgt Srvc Director: Internal	[Date Signed:	BA # - 2014- <u>092</u>
	<input type="checkbox"/>	Signature: _____		

OK DW 8/8/14

Robin Rollayes 8/13/14