

Updated 12/15/14
 Susan Peterson

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

For Accounting use: FY 14-15 Accounting Approval: [Signature]
 Fiscal Year: 03 Entered By: CM 12/14
 Transaction Date: 12/5/14 Group Number: 1077

Department/Division Carry Forward - Sewer Impact Fees #18

Dept. Authorization _____

| Account Number | Fund / Account Description | Increase | Decrease |
|----------------------|---|---------------|----------|
| 409-3300-533.31-99 ✓ | Professional Services/Other CPH, INC prj. 12-012 | 10,000 | |
| 409-0000-389.90-00 | FY FUND BALANCE | 10,000 | |
| Count | TOTAL | 20,000 | |

-----Must Balance-----
 (\$0 not use cents)

Notes / Comments

State/Local Law Enforcement Trust Funds (Confiscated funds) to be used for Overtime, supporting the POP program.

| | | | |
|-----------------------|----------------------------------|-------------------------------|---------------------------|
| Approved By: | City Council: Exceeds \$35,000 | Informational Note Only: | Resolution #2923-14 |
| Check Appropriate Box | City Manager: Less than \$35,000 | Programs/Capital not budgeted | Approval Date: 11/17/2014 |
| | Mgt Svc Director: Internal | must be presented to Council | BA # - 2015-041 |
| <u>[Signature]</u> | Signature: | Date Signed: | |

Robert R. Hayes 12/5/14