

Updated 4/27/15  
 Peggy Jelma

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

**For Accounting use:**

|                                    |   |
|------------------------------------|---|
| <b>Fiscal Year:</b> 2014/15        | <b>Accounting Approval:</b> <i>Jerry Bays</i> |
| <b>Period:</b> 7                   | <b>Entered By:</b> <i>CAI 4/24/15</i>         |
| <b>Transaction Date:</b> 4/20/2015 | <b>Group Number:</b> 3240                     |

**Department/Division** Human Resources

**Dept. Authorization** \_\_\_\_\_

| Account Number       | Fund / Account Description | Increase  | Decrease    |
|----------------------|----------------------------|-----------|-------------|
| 510-5610-562.49-99 ✓ | Other current charges      |           | \$ - 12,000 |
| 510-5610-562.48-51 ✓ | Wellness Incentives        | \$ 12,000 |             |

|              |              |                        |                  |
|--------------|--------------|------------------------|------------------|
| <b>Count</b> | <b>TOTAL</b> | <b>\$12,000</b>        | <b>-\$12,000</b> |
|              |              | -----Must Balance----- |                  |
|              |              | (Do not use cents)     |                  |

**Notes / Comments**

Wellness incentive dollars were broken out into a separate accounting string.

|  |                                  |   |                      |                 |
|--|----------------------------------|---|----------------------|-----------------|
| <b>Approved By:</b><br>Check Appropriate Box | City Council: Exceeds \$35,000   | Informational Note Only:<br>Programs/Capital not budgeted<br>must be presented to Council | Resolution #         |                 |
|  | City Manager: Less than \$35,000 |   | Approval Date:       |                 |
|  | Mgt Srvc Director: Internal      | Signature: _____  | [Date Signed: _____] | BA # - 2015-111 |
|  | <i>OK DW 4/21/15</i>             |   |                      |                 |

*Robert Hayes 4-21-15*