

Updated 8/6/15  
 Peggy Johnson

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

**For Accounting use:**

Fiscal Year: _____	2015	Accounting Approval: _____
Period: _____	11	Entered By: <u>C.V. 8/5/15</u>
Transaction Date: <u>8/3/15</u>		Group Number: <u>5042</u>

Department/Division Promotional

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

Account Number	Fund / Account Description	Increase	Decrease
001-9000-513.48-99 ✓	Promotional Activities/Other Promotional Activities ✓	88	
001-1305-513.52-99 ✓	Operating Supplies/Other Operating Supplies ✓		-88 ✓

<b>TOTAL</b>	<b>\$88</b>	<b>-\$88</b>
	-----Must Balance-----	
	(Do not use cents)	

**Notes / Comments**

to cover costs of Employee Luncheon

<b>Approved By:</b> Check Appropriate Box  ok dw 07.28.15	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: _____]

*Robert Hayes* 8/3/15