Updated 9/9/15
Peggy Johnson

CITY OF OVIEDO
BUDGET TRANSFER/AMENDMENT DETAIL FORM

For Accounting use:

Fiscal Year:	2014/15	**Accounting Approval:**	Jerry Bass
Period:	12	**Entered By:**	C.H. 9/8/15
Transaction Date:	9/2/2015	**Group Number:**	5608

Department/Division Human Resources 1201

Dept. Authorization Connie Collins/HR Director

Account Number	Fund / Account Description	Increase	Decrease
001-1201-512.12.10	Regular Salaries		$ - 1,900
001-1201-512.23.06	Dependent Health Insurance	$ 1,900	
001-1201-512.46.26	R/M Equipment Repair		$ - 200
001-1201-512.43.20	Water/Sewer	$ 200	
001-1201-512.40.00	Travel & Per Diem		$ - 100
001-1201-512.43.20	Water/Sewer	$ 100	
001-1201-512.47.00	Printing and Binding		$ - 75
001-1201-512.52.05	Computer Supplies		$ - 150
001-1201-512.52.99	Other Operating Supplies	225	
Count			
	TOTAL	**$2,425**	**$2,425**

------Must Balance-----
(Do not use cents)

Notes / Comments

End of fiscal year clean up

Approved By: Check Appropriate Box				
		City Council: Exceeds $35,000	Informational Note Only:	Resolution #
		City Manager: Less than $35,000	Programs/Capital not budgeted	Approval Date:
	X	Mgt Srvc Director: Internal	must be presented to Council	BA # - 2015-184
OK DW 9/2/15		Signature:	[Date Signed:	

Robert R Hayes 9/2/15