Updated 9/14/15
Peggy Johnson

CITY OF OVIEDO
BUDGET TRANSFER/AMENDMENT DETAIL FORM

For Accounting use:

Fiscal Year:	FY14/15 2015	**Accounting Approval:**	Jerry Boop
Period:	End of Year 12	**Entered By:**	C.H. 9/11/15
Transaction Date:	9/9/15	**Group Number:**	5715

Department/Division Recreation & Parks

Dept. Authorization Dru D. Bouwore

Account Number	Fund / Account Description	Increase	Decrease
001-7202-572-12-25	Regular Salaries / Appreciation Pay	$ 750	
001-7202-572-13-10	Other Salaries / part time	$ 150	
001-7202-572-54-20	Books, pubs, subs / training		$ 900
Count			
	TOTAL	**$900**	**$900**

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

Notes / Comments
End of year transfers are included in order to eliminate accounts with a negative balance.

Approved By:		City Council: Exceeds $35,000	Informational Note Only:	Resolution #
Check Appropriate Box		City Manager: Less than $35,000	Programs/Capital not budgeted	Approval Date:
		Mgt Srvc Director: Internal	must be presented to Council	BA # 2015-191
OK DW 9/9/15		Signature:	[Date Signed:	

Robert R Hayes 9/9/15