

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

For Accounting use:

Fiscal Year: 2015
 Period: _____
 Transaction Date: _____

Accounting Approval: _____
 Entered By: _____
 Group Number: _____

Department/Division Public Works - Stormwater 3800 and 3802

Dept. Authorization Bobby Wyatt *B*

Account Number	Fund / Account Description	Increase	Decrease
138-3800-538.54-40 ✓	Books, Publications, Subs/ Recertifications	830	
138-3800-538.48-99 ✓	Promotional Activities / Other		-330 ✓
138-3802-538.52-99 ✓	Operating Supplies / Other		-500 ✓

TOTAL \$ 830 \$ - 830

Notes / Comments

Request to transfer funds to cover a line item shortage in this account/s.

Approved By: Check Appropriate Box	<input type="checkbox"/> City Council: Exceeds \$35,000	Informational Note Only: Programs/Capital not budgeted must be presented to Council	Resolution # _____
	<input checked="" type="checkbox"/> City Manager: Less than \$35,000		Approval Date: _____
	<input type="checkbox"/> Mgt Srvc Director: Internal	Signature: _____	BA # - 2015- <u>089</u>
	<input type="checkbox"/>		[Date Signed: _____]

Robert R. Hayes 3/10/15