

GROUP NUMBER . . : 03354 R#2014-049  
 GROUP USER . . . : COCOCTN Neuterma, Charlene - Gra

TRANS NO	TRANS DATE	DOCUMENT	ACCOUNT NUMBER	DESCRIPTION 1	PROJECT	BUDGET AMOUNT	ORIG(Y/N)
		TYPE	WORK ORDER	JOB# FACILITIES ID			
0000100	05/28/2014	R#2014-049	001-0000-334.61-10	EMS GRANT		26,446.00	
0000200	05/28/2014	R#2014-049	001-2201-522.64-00	EMS GRANT	FD1401	26,446.00	

TOTALS:

	AMOUNT CALCULATED	AMOUNT ENTERED	DIFFERENCE
COUNT:	2	2	
AMOUNT:	52,892.00	52,892.00	



City of Cocoa Budget Adjustment Form FY 2014

SELECT ADJUSTMENT TYPE: BUDGET AMENDMENT REQUESTING DEPARTMENT #: 2201 DATE PREPARED: 05/07/14

'REVENUE' ACCOUNT(S)

Table with 8 columns: ADJUSTMENT AMOUNT, ACCOUNT NUMBER, PROJECT NUMBER, ACCOUNT NAME, ORIGINAL BUDGET, AMENDED BUDGET, ADJUSTED BUDGET, UNENCUMBERED BALANCE. Row 1: \$26,446, 001-0000-334-61-10, Brevard County EMS Grant, \$0, \$0.00 26,446, \$26,446, \$26,446.

'EXPENSE' ACCOUNT(S)

Table with 8 columns: ADJUSTMENT AMOUNT, ACCOUNT NUMBER, PROJECT NUMBER, ACCOUNT NAME, ORIGINAL BUDGET, AMENDED BUDGET, ADJUSTED BUDGET, UNENCUMBERED BALANCE. Row 1: \$26,446, 001-2201-522-64-00, FD1401, Machinery & Equipment, \$38,600, \$38,600, \$65,046, \$52,330.

REASON/JUSTIFICATION FOR ADJUSTMENT:

Amend the budget to accept the FY2014 Brevard County EMS Grant in the amount of \$26,446.00

COUNCIL APPROVAL REQUIRED? YES [X] NO [ ] DATE APPROVED: 5/27/14 RESOLUTION #: 2014-49 Council approval is needed for all transfers greater than \$50,000 and transfers between Departments / Divisions. Attach copy of agenda item and City Clerk's Journal noting approval.

Requestor's Signature: Charlene Steuterman 5/7/14 Finance Approval Signature: [Signature] 15 May 14 Finance Dir./Asst. CM's Signature: [Signature] 5.28.14 Director's Signature: [Signature] 5/8/14 Finance Manager's Signature: [Signature] 5.13.14 City Manager's Signature: [Signature] 5/27/14

FINANCE USE ONLY:

Date Entered: 5/28/14 Entered By: [Signature] Group #: 3354