City of Cocoa Budget Adjustment Form FY 2017

SELECT ADJUSTMENT TYPE: BUDGET TRANSFER | REQUESTING DEPARTMENT #: 3230 | DATE PREPARED: 03/16/17

'FROM' ACCOUNT(S)

ADJUSTMENT AMOUNT	ACCOUNT NUMBER	PROJECT NUMBER	ACCOUNT NAME	ORIGINAL BUDGET	AMENDED BUDGET	ADJUSTED BUDGET	UNENCUMBERED BALANCE
($ 500)	110-3230-559.39-00		Contingency Account	$ 305,219	$ 294,369	$ 293,869	$ 293,869
$ 0				$ 0	$ 0	$ 0	$ 0
$ 0				$ 0	$ 0	$ 0	$ 0
$ 0				$ 0	$ 0	$ 0	$ 0
$ 0				$ 0	$ 0	$ 0	$ 0
$ 0				$ 0	$ 0	$ 0	$ 0
($ 500)	TOTAL						

'TO' ACCOUNT(S)

ADJUSTMENT AMOUNT	ACCOUNT NUMBER	PROJECT NUMBER	ACCOUNT NAME	ORIGINAL BUDGET	AMENDED BUDGET	ADJUSTED BUDGET	UNENCUMBERED BALANCE
$ 500	110-3230-559.49-00		Other Charges and Obligations	$ 750	$ 750	$ 1,250	$ 571
$ 0				$ 0	$ 0	$ 0	$ 0
$ 0				$ 0	$ 0	$ 0	$ 0
$ 0				$ 0	$ 0	$ 0	$ 0
$ 0				$ 0	$ 0	$ 0	$ 0
$ 0				$ 0	$ 0	$ 0	$ 0
$ 500	TOTAL						

REASON/JUSTIFICATION FOR ADJUSTMENT:

Budget transfer to account for anticipated shortfall in Other Charges and Obligations account, which is used to pay Brevard County Clerk of Courts recording fees. CRA Board Meeting date 5-2-17.

CITY COUNCIL APPROVAL REQUIRED? *YES* ○ *NO* ● | *DATE APPROVED:* _____ | *RESOLUTION #:* _____

City Council approval is needed for all transfers greater than $50,000 and transfers between Departments / Funds. Attach copy of agenda item and City Clerk's Journal noting approval.

	Samia Singleton (Digitally signed by Samia Singleton DN: dc=org, dc=cocoafl, ou=CH, cn=Samia Singleton, email=ssingleton@cocoafl.org Date: 2017.03.20 09:13:06 -04'00')	3/21/17	Lea Taylor (Digitally signed by Lea Taylor Date: 2017.03.21 09:28:13 -04'00')	5/3/17	Teri Butler (Digitally signed by Teri Butler Date: 2017.05.03 09:07:57 -04'00')
Date	Requestor's Signature	Date	Finance Approval Signature	Date	Finance Director's Signature
3/20/17	Steven Belden (Digitally signed by Steven Belden Date: 2017.03.20 09:22:47 -04'00')	3/21/17	Lora Howell (Digitally signed by Lora Howell Date: 2017.03.21 09:37:14 -04'00')	5/4/17	John A. Titkanich (Digitally signed by John A. Titkanich Date: 2017.05.04 09:54:52 -04'00')
Date	Department Director's Signature	Date	Deputy Fin. Director's Signature	Date	City Manager's Signature

FINANCE USE ONLY:

Date Entered: _____ Entered By: _____ Group #: _____