City of Cocoa Budget Adjustment Form FY 2017

SELECT ADJUSTMENT TYPE: BUDGET TRANSFER **REQUESTING DEPARTMENT #:** 1500 **DATE PREPARED:** 10/26/17

'FROM' ACCOUNT(S)

ADJUSTMENT AMOUNT	ACCOUNT NUMBER	PROJECT NUMBER	ACCOUNT NAME	ORIGINAL BUDGET	AMENDED BUDGET	ADJUSTED BUDGET	UNENCUMBERED BALANCE
($ 264)	001-1510-536.12-00		REGULAR SALARIES & WAGES	$ 761,541	$ 710,707	$ 710,443	$ 43,844
$ 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
($ 264)	TOTAL						

'TO' ACCOUNT(S)

ADJUSTMENT AMOUNT	ACCOUNT NUMBER	PROJECT NUMBER	ACCOUNT NAME	ORIGINAL BUDGET	AMENDED BUDGET	ADJUSTED BUDGET	UNENCUMBERED BALANCE
$ 156	001-1510-536.12-12		ACCRUAL PAYOUTS	$ 5,187	$ 26,080	$ 26,236	$ 0
$ 108	001-1510-536.13-00		OTHER SALARIES & WAGES	$ 0	$ 25,941	$ 26,049	$ 0
$ 0				$ 0	$ 0	$ 0	$ 0
$ 0				$ 0	$ 0	$ 0	$ 0
$ 0				$ 0	$ 0	$ 0	$ 0
$ 0				$ 0	$ 0	$ 0	$ 0
$ 264	TOTAL						

REASON/JUSTIFICATION FOR ADJUSTMENT:

This transfer is to cover the unanticipated additional wages and Accrual Payouts for the Finance Utility Accounting Division.
Agenda 17-469

City COUNCIL APPROVAL REQUIRED? ***YES*** (●) ***NO*** ( ) ***DATE APPROVED:*** 11/14/17 ***RESOLUTION #:*** 2017-123

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.

10/26/17	Lea Taylor — Digitally signed by Lea Taylor Date: 2017.10.26 13:21:11 -04'00'	10/31/17	Lea Taylor — Digitally signed by Lea Taylor Date: 2017.10.31 14:44:19 -04'00'	11/15/17	Teri Butler — Digitally signed by Teri Butler Date: 2017.11.15 15:22:13 -05'00'
Date	Requestor's Signature	Date	Finance Approval Signature	Date	Finance Director's Signature
10/31/17	Teri Butler — Digitally signed by Teri Butler Date: 2017.10.31 11:10:46 -04'00'	11/8/17	Lora Howell — Digitally signed by Lora Howell Date: 2017.11.08 08:25:02 -05'00'	11/15/17	John A. Titkanich — Digitally signed by John A. Titkanich Date: 2017.11.15 19:21:24 -05'00'
Date	Department Director's Signature	Date	Deputy Fin. Director's Signature	Date	City Manager's Signature

FINANCE USE ONLY:

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