

Budget Transfer Request

Department: **Probation & Community Justice**

Date: **10/26/2017**

# \_\_\_\_\_ (for Finance use)

<i>FROM:</i> Department Budget Account			<i>TO:</i> Department Budget Account		Detailed Explanation Required:	
Account	Title	AMOUNT	Account	Title		
1	3142.54472	Telephone	1,550	3160.52210	Office Equipment	To purchase a Projector for the Day Reporting Program to replace the existing one that has suddenly stopped working
2						
3						
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8						
Date of Program Committee			Date Sent to Program Committee			
11/16/2017						
Sender's Initials _____						

<b>SIGNATURES</b>	Department Head	Date Signed	for County Administration use only
	Director of Finance	Date Signed	

**Routing: Submit 4 (four) copies to Finance-Comptroller  
Submit 1 (one) copy to Program Committee for next agenda**