City of Key West BUDGET TRANSFER

Account No./Project No.	Current Budget Finance Use Only	Increase (whole \$ only)	Decrease (whole \$ only)	Revised Budget Finance Use Only
001-1202-512-49 00			\$7,500.00	
001-1903-519-3400	The second secon	\$7,500.00		
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TOTALS:		\$ 7,500.00	\$ 7,500.00	***************************************
To cover cost on outstanding invoice Purchase Order 067705 for Certified Reco	ords Management			
Authorized Signatures Department Head:	Cherix	Smith	Date:	5-11-11
Budget Analyst:			Date:	
Finance Director: _	(up to \$5,000 w/in cate	gory w/in fund)	Date:	<u> </u>
City Manager:	(all w/in category w/in fo	und; all uses of CM co	Date: ontingency; up to \$20	,000 among
* · · · · · · · · · · · · · · · · · · ·	categories w/in fund; u		to fund)	
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Finance Use Only Total Items:		Entered by:		_
Group No.: Acct Balance Verified:	-	. Date:		- '