



502 E. Jefferson Street
 Tallahassee, FL 32301
 Phone: 850.222.8028
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 www.flaports.org

Invoice

Date	Invoice #
10/1/2014	2466

Bill To
Port of Key West City of Key West Port Operations PO Box 1409 Key West, FL 33041

Terms	Due Date
Upon Receipt	10/1/2014

Description	Amount
Florida Ports Council Annual Membership Dues for fiscal year 2014/2015, beginning October 1, 2014. <i>Reg. 94150</i>	20,500.00

Remit to Florida Seaports Council, Inc. DBA Florida Ports Council FEIN# 59-3267382	Balance Due	\$20,500.00
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Florida Ports Council Annual Dues
FY14/15

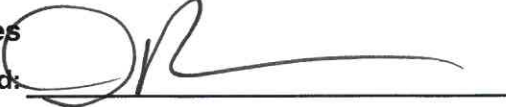
<u>PORT</u>	<u>GROSS REVENUE</u>	<u>CATEGORY</u>	<u>DUES + 2%</u>
EVERGLADES	\$ 139,177,090.00	V	\$ 96,000.00
MIAMI	\$ 104,000,000.00	Over 100 Million	\$ 96,000.00
CANAVERAL	\$ 58,000,000.00	IV	\$ 73,500.00
JACKSONVILLE	\$ 50,871,000.00		\$ 73,500.00
TAMPA	\$ 42,009,000.00	Over 40 Million	\$ 73,500.00
PALM BEACH	\$ 12,160,000.00	III	\$ 33,000.00
MANATEE	\$ 11,928,000.00	over 10 Million -	\$ 33,000.00
PANAMA CITY	\$ 11,858,000.00	40 Million	\$ 33,000.00
KEY WEST	\$ 4,556,000.00	II	\$ 20,500.00
FERNANDINA	\$ 3,400,000.00	1 Million -	\$ 20,500.00
PENSACOLA	\$ 2,062,000.00	10 Million	\$ 20,500.00
ST. PETERSBURG	\$ 185,000.00		\$ 15,500.00
ST. JOE	\$ -	I	\$ 15,500.00
CITRUS	\$ -	Under 1 Million	\$ 15,500.00
FT. PIERCE	\$ -		\$ 15,500.00
DUES			\$ 635,000.00
TOTAL			\$ 635,000.00

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
001-4302-543- 341 ⁴⁰			\$2,000	
001-4302-543- 54 ⁴⁰ -54		\$2,000		
TOTALS:				

Justification: Increase in Annual Membership Dues for Florida Port Council

Authorized Signatures

Department Head:  **Date:** 3/23/15

Budget Analyst: _____ **Date:** _____

Finance Director: _____ **Date:** _____
(up to \$5,000 w/in category w/in fund)

City Manager: _____ **Date:** _____
(all w/in category w/in fund; all uses of CM contingency;
up to \$20,000 among categories w/in fund)

City Commission Approval Required? Yes _____ No _____

Finance Use Only	Total Items: _____	Entered by: _____
	Group No.: _____	Date: _____
	Acct. Balance Verified: _____	