

FILED

DEC 07 2017

RESOLUTION 36, 2017

CITY CLERK

BE IT RESOLVED BY THE COMMON COUNCIL OF THE CITY OF TERRE HAUTE, INDIANA:

WHEREAS, There are insufficient funds in a certain account of the City Council budget to meet current and anticipated expenditures within said Department, and;

WHEREAS, There are surplus funds in another account of the same budget, said Accounts being within the appropriation heretofore made for the use of said Department.

BE IT THEREFORE RESOLVED: That the following transfers be made in the Accounts heretofore appropriated for the use of said Department:

FROM: #0101-0004-03-432.020	Instruction (City Council)	\$ 500.00
FROM: #0101-0004-03-432.080	Legal Services (City Council)	\$5,000.00
FROM: #0101-0004-03-433.030	Travel (City Council)	\$1,000.00
FROM: #0101-0004-03-434.010	Printing (City Council)	\$ 750.00
TO: #0101-0004-01-413.030	Group Health (City Council)	\$7,250.00
<b>TOTAL</b>		<b>\$7,250.00</b>

Introduced by: O. Earl Elliott O. Earl Elliott, Councilman

Passed in open Council this 14th day of December, 2017.

Karrum Nasser Karrum Nasser, President

ATTEST: Charles P. Hanley Charles P. Hanley, City Clerk

Presented by me to the Mayor this 14th day of December, 2017.

Charles P. Hanley Charles P. Hanley, City Clerk

Approved by me, the Mayor, this 14th day of December, 2017.

Duke A. Bennett Duke A. Bennett, Mayor

ATTEST: Charles P. Hanley Charles P. Hanley, City Clerk

**REQUEST FOR TRANSFER OF BUDGETED FUNDS**

(For Approval by Mayor, Controller, and City Council)

This form is to be used when the requested transfer is between two major classifications.

DEPARTMENT or FUND: CITY COUNCIL

DATE: 12-6-17

	<u>Account #</u>	<u>Account Name</u>	<u>Amount</u>
FROM:	<u>Instruction</u>	<u>0101-0004-03-432.020</u>	<u>\$ 500<sup>00</sup></u>
TO:	<u>Group Health</u>	<u>0101-0004-01-413.030</u>	<u>\$ 500<sup>00</sup></u>
FROM:	<u>Legal Services</u>	<u>0101-0004-03-432.080</u>	<u>\$ 5,000<sup>00</sup></u>
TO:	<u>Group Health</u>	<u>0101-0004-01-413.030</u>	<u>\$ 5,000<sup>00</sup></u>
FROM:	<u>Travel</u>	<u>0101-0004-03-433.080</u>	<u>\$ 1,000.<sup>00</sup></u>
TO:	<u>Group Health</u>	<u>0101-0004-01-413.030</u>	<u>\$ 1,000.<sup>00</sup></u>
FROM:	<u>Printing</u>	<u>0101-0004-03-434.010</u>	<u>\$ 750.<sup>00</sup></u>
TO:	<u>Group Health</u>	<u>0101-0004-01-413.030</u>	<u>\$ 750.<sup>00</sup></u>

**Total Amount to Be Transferred** \$ 7,250<sup>00</sup>

Department Head Approval: Michelle Edwards Date: 12-6-17  
(Forward to Mayor) Signature Chief Deputy

Mayoral Approval: \_\_\_\_\_ Date: \_\_\_\_\_  
(Forward to Controller) Signature

Controller Approval: Leslie A. Ellis Date: 12/6/17  
(Forward to the Legal Department)

Received by Legal: \_\_\_\_\_ Resolution # 36  
Date DEC 06 2017

**RECEIVED**

**DEPARTMENT HEAD:** Please attach a **CITY LEGAL** memo to this form briefly detailing the need for this resolution. Such information should include the specific services or products you intend to purchase and the reason you have surplus funds in the specified accounts.