

REQUEST FOR TRANSFER OF FUNDS

FUND NAME: Solid Waste Capital Improvement DATE: 11/7/23 BATCH NO. _____

FISCAL YEAR: 23-24 FUND #: 40132 DOC TYPE: YB LEDGER TYPE BA

TO: Solid Waste R&R Clewiston Transfer Station
(DIVISION NAME) (PROGRAM NAME)

<u>ACCOUNT NUMBER</u>	<u>OBJECT NAME</u>	<u>DEBIT</u>
20079740132.506540	Improvement Construction	\$1,000,000

TOTAL TO: **\$1,000,000**

FROM: Non-Departmental Reserves
(DIVISION NAME) (PROGRAM NAME)

<u>ACCOUNT NUMBER</u>	<u>OBJECT NAME</u>	<u>CREDIT</u>
GC5890140132.509910	Reserves	\$1,000,000

TOTAL FROM: **\$1,000,000**

EXPLANATION:

Transfer from reserves to Ash Monofill Sideslope Closure

**BOARD OF COUNTY COMMISSIONERS
LEE COUNTY, FLORIDA**

Chair

BA NO: _____ AUTH CODE: _____ TRANS DATE: _____