

EXHIBIT 1

**CITY OF OVIEDO  
BUDGET TRANSFER/AMENDMENT DETAIL FORM**

**For Accounting use:**

<b>Fiscal Year:</b>	<u>FY 2022-23</u>	<b>Accounting Approval:</b>	_____
<b>Period:</b>	<u>11</u>	<b>Entered By:</b>	_____
<b>Transaction Date:</b>	<u>8/21/2023</u>	<b>Group Number:</b>	_____
		<b>Updated By:</b>	_____

**Department/Division** Development Services

**Dept. Authorization** \_\_\_\_\_

Account Number	Project Number	Fund / Account Description	Increase	Decrease
141-0000-389.90-00		Other Sources/Use of Fund Balance	4,800	
141-1500-515.31-99		Professional Services	4,800	
<b>TOTAL</b>			<b>\$9,600</b>	<b>\$0</b>

-----Must Balance-----  
(Do not use cents)

**Notes / Comments**  
Watercolor design map

<b>Approved By:</b> Check Appropriate Box	<input type="checkbox"/>	City Council: Exceeds \$50,000	Informational Note Only: Programs/Capital not budgeted must be presented to Council	Resolution # 4359-23
		City Manager: Less than \$50,000		Approval Date: 8/21/23
		Signature:		BA # -
	<input checked="" type="checkbox"/>	Finance Director: Less than \$25,000		
		Signature:		
		Budget:		