

Funds Transfer Request Form, Ohio Revised Code Section 5705.16

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|---|-----|------|
| Name: | | |
| Street address: | | |
| City: State: ZIP code: | | |
| Daytime phone number: | | |
| E-mail address: | | |
| Please state reason and/ or necessity for the requested transfer. | | |
| 2. Identify the transferor fund: | | |
| 3. Amount to be transferred: | | |
| 4. Source(s) of revenue in the transferor fund; e.g., tax levies, fees, grants, sales of surplus property. | | |
| 5. If the fund includes tax levy proceeds, provide the type of levy; e.g., property, sales or income tax 5a. Amount of the levy: Please provide Revised Code under which it is authorize | | |
| 6. Current unencumbered balance of the transferor fund: | | |
| 7. Please provide total expenditures of the transferor fund for the last 3 fiscal years: | | |
| 8. Please provide total revenue of the transferor fund for the last 3 fiscal years: | | |
| 9. Please provide ending fund balance of the transferor fund for the last 3 fiscal years: | | |
| 10. Will the transferor fund be used after the transfer? | Yes | ☐ No |
| 11. Are the funds to be transferred the unexpended balance in a bond retirement fund? | Yes | No |
| 12. Does the taxing authority have any sinking fund or outstanding bond obligations? | Yes | No |
| 13. Identify the transferee fund: | | |
| 15. What is the purpose of the transferee fund: | | |
| 16. Has the taxing authority completed a similar fund transfer in the past five years? | Yes | ☐ No |
| 16a. Please provide the dates and amounts for similar fund transfers: | | |
| 17. Is this transfer at the recommendation of the Auditor of State? | Yes | ☐ No |
| 17a. Please Describe: | | |
| 18. Is the taxing authority currently, or has ever been, in a state of fiscal caution, watch, or emergency? | Yes | ☐ No |

Please attach a copy of the ordinance or resolution authorizing the transfer.