



CITY OF NEW BEDFORD

JONATHAN F. MITCHELL, MAYOR

April 7, 2016

City Council President Linda Morad
Honorable Members of the City Council
133 William Street
New Bedford, MA 02740

Dear Council President Morad and Honorable Members of the City Council:

I am submitting for your approval an ORDER that the sum of **ELEVEN THOUSAND FIVE HUNDRED DOLLARS (\$11,500.00)** now standing to the credit of the account from **HEALTH CAPITAL OUTLAY** be and the same is hereby transferred and appropriated to as follows:

HEALTH CHARGES AND SERVICES..... \$11,500.00

To be certified and approved by the Department Head

Sincerely,

Jonathan F. Mitchell
Mayor

JFM/smt



CITY OF NEW BEDFORD

CITY COUNCIL

April 14, 2016

ORDERED, that the sum of **ELEVEN THOUSAND FIVE HUNDRED DOLLARS (\$11,500.00)** now standing to the credit of the account from **HEALTH CAPITAL OUTLAY** be and the same is hereby transferred and appropriated to as follows:

HEALTH CHARGES AND SERVICES..... \$11,500.00

To be certified and approved by the Department Head



CITY OF NEW BEDFORD

JONATHAN F. MITCHELL, MAYOR

HEALTH DEPARTMENT

BOARD OF HEALTH
ATHENA XIFARAS, M.D.,
PATRICIA L. ANDRADE, M.D.
CRAIG LONGO, M.D.

Memo

To: Mayor Jon Mitchell

From: Brenda Weis, Health Director

Date: March 11, 2016

Re: Funds Transfer

I am requesting a transfer of funds from the Health Department's 800 account (object# 588130 – computer equipment - \$10,000.00, and object #588150 – computer software - \$1,500.00) to the 200 account (object# 520300) to cover salary for the dental hygienists providing dental services for New Bedford Public School students. The dental hygienists are contractors to the Health Department. Their contracts were reduced this year as a cost-saving mechanism in a tight budget year. There was an unexpected surplus of funds in the 800 account due to the housing compliance computer system not being ready for iPad implantation as anticipated. The transfer will enable the dental hygienists to provide preventive dental services to a larger number of students than expected this year.

Thank you,

Brenda K. Weis

CITY COUNCIL TRANSFER INFORMATION

DEPARTMENT NAME Health

DEPARTMENT NUMBER 510

TRANSFER AGENDA DATE March 22, 2016

TRANSFER AGENDA NUMBER _____

<u>TO/FROM</u>	<u>ACCOUNT NUMBER</u>	<u>DOLLAR AMOUNT</u>
<u>obj. 588130</u>	<u>obj. 520300</u>	<u>10,000</u>
<u>obj. 588150</u>	<u>obj. 520300</u>	<u>1,500</u>
_____	_____	_____
_____	_____	_____

DEPT. HEAD SIGNATURE

