

**Franklin Public Schools  
Franklin, Massachusetts 02038**

**Action Required**

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**Subject:** Transfers

**Date:** February 23, 2021

**Dept:** School Committee

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**Reason:** Required Vote

**Enclosure:** yes

**Recommendation:**

Transfers

I recommend approval of the budget transfers as detailed.

**Action Requested of the School Committee:**

Majority vote of the School Committee is required.

<u><b>Vote Tabulator</b></u>	
A Bergen:	Y / N
J D'Angelo:	Y / N
J Pond-Pfeffer:	Y / N
E Stokes:	Y / N

T Keenan:	Y / N
M J Scofield:	Y / N
D Spencer:	Y / N
Action:	_____

**Budget Transfers  
for Approval 2/23/2021**

<b>Org</b>	<b>Object</b>	<b>Org Description</b>	<b>To</b>	<b>From</b>
43142002	511580	1420-Human Resources	6,000	
40232501	512120	2325-Substitutes		6,000
31271001	511370	2710-Counseling Services	10,000	
31235201	511390	2352-Instructional Coach		10,000

<b>Total</b>	<b>16,000</b>	<b>16,000</b>
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School Committee Approval: \_\_\_\_\_

School Business Administrator: \_\_\_\_\_

Town Finance Director: \_\_\_\_\_

**Reclassification of Expenses from Budgetary Accounts to Revolving Accounts  
for Approval 2/23/2021**

Account Number DESE Function	Org	Object	Description	Increase Expenses	Lower Expenses
grant project 24021	40520055	517150	Health Insurance - IDEA Grant	\$ 97,603.20	
grant project 30521	40520055	517150	Health Insurance - Title I Grant	\$ 10,626.30	
5200	40520005	517150	Health Insurance		\$ 108,229.50

<b>Total</b>	<b>\$108,229.50</b>	<b>\$108,229.50</b>
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School Committee Approval: \_\_\_\_\_

School Business Administrator: \_\_\_\_\_

Town Finance Director: \_\_\_\_\_