

Reclamation Manual

Policy / Directives and Standards

Working Capital Fund (WCF), Fund Balance with Treasury (FBWT) Transfers

This Appendix details the process for requesting and completing WCF FBWT transfers.

1. Regional/Directorate Responsibilities.

A. WCF Activity Manager of the activity requesting the transfer (receiver) and WCF Activity Manager of the activity providing the transfer (sender).

- (1) Receiver and sender document details of the transfer to include repayment terms.
- (2) Receiver completes the FBWT transfer request form (page D3 of this Appendix) and documents the supplementary information for the transfer (page D4 of this Appendix). The particulars of the form can change. Current forms are available on the WCF SharePoint site.
- (3) Receiver signs and dates the appropriate line on the FBWT transfer request form.
- (4) Sender signs and dates the appropriate line on the FBWT transfer request form.

B. Regional WCF Coordinator (Coordinator). The Regional WCF Coordinator:

- (1) signifies regional review of the increase request by signing and dating the FBWT transfer request form on the appropriate line;
- (2) submits the completed FBWT transfer request form and the supplementary information to the WCF Advisor through the Reclamation-wide WCF Coordinator (RWCFC), Policy, Compliance and Audit Branch (PC&A) 84-27410;
- (3) resolves any issues upon WCF Advisor review of the transfer (e.g., an insufficient justification, omissions of necessary information, incorrect amounts on the form, etc.) and resubmits it to the RWCFC; and
- (4) initiates action in the region to process the transfer in the Federal Business Management System via a VB document (expense to revenue) upon receipt of the approved FBWT transfer request form.

C. Regional WCF Manager. The Regional WCF Manager signifies regional approval of the FBWT transfer request by signing and dating the FBWT transfer request form on the appropriate line.

Reclamation Manual

Policy / Directives and Standards

2. Management Services Office (MSO), Denver.

A. Reclamation-wide WCF Coordinator or RWCFC. The RWCFC:

- (1) examines the FBWT transfer request for accuracy, completeness and an adequate justification for the transfer upon receipt;
- (2) presents the region's/directorate's FBWT transfer request form to the WCF Advisor (CAT Manager) for further review;
- (3) sends the budget increase request back to the regional WCF coordinator to obtain more information or corrections if the Management Services Organization (the RWCFC, WCF Advisor, or the Finance, Policy & Programs Division Manager) finds the FBWT transfer request lacking in justification, incomplete, or inaccurate;
- (4) sends the approved form to the Coordinator upon the Reclamation-wide WCF Manager's approval of the FBWT transfer request.

B. WCF Advisor. The WCF Advisor:

- (1) examines the region's/directorate's FBWT transfer request for accuracy and completeness;
- (2) returns the budget increase to the RWCFC to send to the region/directorate for more information/corrections if necessary;
- (3) submits the approved budget increase to the Reclamation-wide WCF Manager for final approval; and
- (4) publishes new forms, if necessary, through memoranda and makes them available on the WCF SharePoint site.

C. Reclamation-wide WCF Manager. The Reclamation-wide WCF Manager signifies approval of the region's/directorate's FBWT transfer request through signature and date on the appropriate line of the region's/directorate's transfer request form.

Reclamation Manual

Policy / Directives and Standards

WORKING CAPITAL FUND (WCF) TRANSFER OF FUND BALANCE WITH TREASURY (FBWT) BETWEEN WCF ACTIVITIES

To: Director, Management Services Office
Attention: 84-27410 (Aaron Smith, Avsmith@usbr.gov, WCF Advisor)

From: Regional WCF Manager, XX Region, Mail Code

Subject: Request to Transfer FBWT from R4XXX to R4XXX, FY 20XX

Amount: \$XX,XXX

Justification(s): (Provide reason for transfer)

Action: Approve, as follows:
R4XXX (XX Region) +XX,XXX
R4XXX (XX Region) - XX,XXX

Date Submitted to DO: Month/Date/Year

Critical Date: Month/Date/Year

WCF Activity Manager: Name, Mail Code, Phone Number

Requested by WCF Activity Manager (Receiver): _____
Signature Date

Approved by WCF Activity Manager (Sender): _____
Signature Date

Reviewed by WCF Coordinator: _____
Signature Date

Approved by Regional WCF Manager: _____
Signature Date

Approved Reclamation-wide WCF Manager: _____
Signature Date

cc: 84-27410 (Pochatek, BOverdiek),
XX-XXXXX (Receiver), XX-XXXXX (Sender), XX-XXXXX (Coordinator),
XX-XXXXX (Denver/Regional WCF Manager)

Reclamation Manual

Policy / Directives and Standards

FBWT Transfer Requests also require submission of the following supplementary information to the request form:

Initial Transfer Information: *

Receiver (Revenue)

Work Breakdown Structure (WBS) Element:

Fund Center:

General Ledger (GL)/Revenue Source Code: 5200.Y00000

Sender (Expense)

WBS Element:

Fund Center:

GL/Commitment Item:

Repayment Information: **

Repayment Plan Schedule

20xx: \$ ____ .00

20xx: \$ ____ .00

20xx: \$ ____ .00

20xx: \$ ____ .00

20xx: \$ ____ .00

20xx: \$ ____ .00

Receiver (Expense)

WBS Element:

Fund Center:

GL/Commitment Item:

Sender (Revenue)

WBS Element:

Fund Center:

GL/Revenue Source Code:

*Requires approval prior to processing VB Document (expense to revenue)

**Does not require approval prior to processing VB Document (expense to revenue)