

# BUDGET TRANSFER REQUEST #1

DOCUMENT TOTAL	458,744 -
NUMBER OF LINES	0
TRANSACTION CODE TOTAL*	0

TRANSFER #	2020138
DATE	
CODE BY	

HNSA - Community Services  
 DEPARTMENT OR AGENCY NAME

*zpk*   
 DEPARTMENT AUTHORIZATION SIGNATURE AND PHONE NUMBER

3/30/2020  
 DATE

COMPLETE THE INFORMATION BELOW WITH JUSTIFICATION NARRATIVE OR ATTACH A MEMO.  
 REMOVE THE GOLD COPY AND SUBMIT COMPLETE REQUEST TO THE AUDITOR / CONTROLLER'S OFFICE.  
 A BUDGET TRANSFER MUST BE AT LEAST TWO LINES, NOT EXCEED TWENTY-SIX LINES AND USE AN "ODD AND EVEN" NUMBERED TRANSACTION CODE\*

\* 002 = INCREASE ESTIMATED REVENUE  
 \* 003 = DECREASE ESTIMATED REVENUE

\* 011 = INCREASE IN APPROPRIATION / BOS APPROVED  
 \* 012 = DECREASE IN APPROPRIATION / BOS APPROVED

S F X	D/C	ORG CODE	GL PROJ	SUB OBJECT NUMBER	PL STRING	AMOUNT	DESCRIPTION (50 CHARACTERS MAX.)
1	C	5210112		0880	BUDGET-SUMMARY	229,372	FY 19-20 Inc State Other COVID Emerg Homeless
2	D	5210112		5000	BUDGET-SUMMARY	229,372	FY 19-20 Inc Supp & Care COVID Emerg Homeless
3							
4							
5							
6							
7							
8							
9							Legistar # 20-0476
10							4/2/20

REVIEWED FOR FORMAT BY

JOE HARN, C.P.A. AUDITOR / CONTR

DATE

CHIEF ADMINISTRATIVE OFFICE - AN/

DATE

CHIEF ADMINISTRATIVE OFFICE

DATE

APPROVED AND SO ORDERED THAT THE ABOVE TRANSFERS BE MADE (AS REQUESTED OR AMENDED) AND INCORPORATED IN THE MINUTES OF THIS MEETING OF THE BOARD OF SUPERVISORS OF THE COUNTY OF EL DORADO

SIGNATURE: CHAIRMAN, BOARD OF SUPERVISORS

DATE

ATTEST: CLERK, BOARD OF SUPERVISORS

✓ Legistar check  
 ✓ minute order

**E-MAILED**

AUDITOR-CONTROLLER  
 MAR 31 '20 PM 4:12