

BUDGET TRANSFER REQUEST #1

TO BE COMPLETED BY THE DEPARTMENT

DOCUMENT TOTAL	-
NUMBER OF LINES	4
TRANSACTION CODE TOTAL*	

AUDITOR / CONTROLLER'S USE	
TRANSFER #	
DATE	
CODE BY	

Department of Transportation & Chief Administrative Office

DEPARTMENT OR AGENCY NAME

LEGISTAR # 19-1090

7/19/2019

DATE

BM B. Martinez

DEPARTMENT AUTHORIZATION SIGNATURE AND PHONE NUMBER

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	FENIX Org	SUB OBJECT NUMBER	PL String	AMOUNT	DESCRIPTION (50 CHARACTERS MAX.)
1	D	1550500	7000	15GF-15TD	2,100,000	FY 18-19 FEMA INC OPERATING TRANSFER OUT
2	C	1560600	0003	N/A	(2,100,000)	FY 18-19 FEMA INC DSGNTN RD INFRA
3	C	3600010	2020	36001000-36LOCAL-36GENFUND-36GENERAL	(2,100,000)	FY 18-19 FEMA INC OPERATING TRANSFER IN
4	D	3610100	1060	36102006-36FEDERAL-36FEMA-36GENERAL	2,100,000	FY 18-19 FEMA DEC FED DISASTER FUNDING FEMA
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14						Prepared by: Brandi Reid

REVIEWED FOR FORMAT BY

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

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

CHIEF ADMINISTRATIVE OFFICE - ANALYST

DATE

SIGNATURE: CHAIRMAN, BOARD OF SUPERVISORS

DATE

CHIEF ADMINISTRATIVE OFFICE

DATE

ATTEST: CLERK, BOARD OF SUPERVISORS