

AUDITOR / CONTROLLER'S USE	
TRANSFER #	
DATE	
CODE BY	

EL DORADO COUNTY APPROPRIATION TRANSFER (28130 GOV. CODE)

BUDGET TRANSFER REQUEST # 1

Public Health ^{7/1/08}
 DEPARTMENT OR AGENCY NAME

TO BE COMPLETED BY THE DEPARTMENT	
DOCUMENT TOTAL	27,840.00 241,140.00
NUMBER OF LINES	7
TRANSACTION CODE TOTAL *	69

01/24/08 *J. Bailey*
 DATE

Joe Harn 6191
 DEPARTMENT AUTHORIZATION SIGNATURE AND PHONE NUMBER

PAGE 1 OF 1

COMPLETE THE INFORMATION BELOW, WITH JUSTIFICATION NARRATIVE OR ATTACH A MEMO.
 REMOVE THE GOLD COPY AND SUBMIT COMPLETED REQUEST TO THE AUDITOR / CONTROLLER'S OFFICE.
 A BUDGET TRANSFER REQUEST 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 E X	TRANS CODE NO. *	INDEX CODE NUMBER	SUB OBJECT NUMBER	USER CODE NUMBER	AMOUNT	DESCRIPTION (80 CHARACTERS MAX.)
1	002	404149	1100		12,960.00	Bud Rev FY 07/08 Las Decisiones Seguras
2	011	404149	4060		3,600.00	↓ ↓ ↓ ↓
3	011	404149	4300		6,000.00	
4	011	404149	5011		2,400.00	
5	011	404149	7254		960.00	
6	011	401111	4500		960.00	
7	012	401111	7384		960.00	
8						
9						
10						
11						
12						
13						

Request to increase estimated revenues and appropriations for the Latino Binge Drinking Prevention Grant.

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

REVIEWED FOR FORMAT BY

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

CHIEF ADMINISTRATIVE OFFICE - ANALYST DATE

CHIEF ADMINISTRATIVE OFFICE DATE

SIGNATURE: CHAIRMAN, BOARD OF SUPERVISORS DATE

ATTEST: CLERK, BOARD OF SUPERVISORS