

AUDITOR / CONTROLLER'S USE	
TRANSFER #	
DATE	
CODE BY	

EL DORADO COUNTY APPROPRIATION TRANSFER (29130 GOV. CODE)

BUDGET TRANSFER REQUEST #1

HSA - Community Services
DEPARTMENT OR AGENCY NAME

TO BE COMPLETED BY THE DEPARTMENT	
DOCUMENT TOTAL	-
NUMBER OF LINES	0
TRANSACTION CODE TOTAL*	0

9/17/2020

DATE

YK

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	ORG CODE	GL PROJ	SUB OBJECT NUMBER	PL STRING	AMOUNT	DESCRIPTION <small>(50 CHARACTERS MAX.)</small>
1	C	5210110		1100	Budget - Summary	(10,336)	FY 20/21 Inc Fed Rev 2019 Planning Grant
2	D	5210110		4300	Budget - Summary	10,336	FY 20/21 Inc Prof & Spec Exp 2019 Planning Grant
3							
4							
5							
6							
7							
8							
9							
0							
1							
2							
3							

Legistar 20-1310
 10/20/20

REVIEWED FOR FORMAT BY

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

 CHIEF ADMINISTRATIVE OFFICE - AN/

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

CHU SEP 18 '20 AM 8:28

SIGNATURE: CHAIRMAN, BOARD OF SUPERVISORS _____ DATE _____

CHIEF ADMINISTRATIVE OFFICE _____ DATE _____

ATTEST: CLERK, BOARD OF SUPERVISORS _____



EL DORADO COUNTY
HEALTH AND HUMAN SERVICES AGENCY

MEMO

Date: September 17, 2020

To: Don Ashton
CAO

From: Yvonne Kollings
HHSA Chief Fiscal Officer

Subject: Health and Human Services Agency (HHSA), Community Services Department (CSD)
request to process the attached Budget Transfer

The Health and Human Services Agency (HHSA), Community Services Department (CSD), is requesting a budget transfer increasing revenue and appropriations due to being awarded the CA-525 2019 Continuum of Care (CoC) Planning Grant. These funds are intended to provide consultant services to the El Dorado County CoC for homeless prevention grant planning, applications, monitoring and compliance. The grant award is in the amount of \$10,336, with an obligation from HHSA to provide \$2,584 in non-federal cash match. The cash match will be met with the State Homeless Emergency Assistance Program (HEAP) Grant funds, as a portion of these funds has already been obligated for similar activities. There is no net impact to County General Fund.

Increase in Revenues:

FENIX Org 5210110

Object: 1100-FED: OTHER

(\$10,336)

PL String: BUDGET-SUMMARY

Increase in Appropriations:

FENIX Org 5210110

Object: 4300 – PROFESSIONAL & SPECIAL SERVICES

\$10,336

PL String: BUDGET-SUMMARY

Signature: _____

Yvonne Kollings

Date: _____

9/17/2020

CAD SEP 17 '20 PM 3:24