

AUDITOR / CONTROLLER'S USE	
TRANSFER #	
DATE	
CODE BY	

# BUDGET TRANSFER REQUEST #1

TO BE COMPLETED BY THE DEPARTMENT	
DOCUMENT TOTAL	\$ 606,172.00
NUMBER OF LINES	22
TRANSACTION CODE TOTAL*	226

CAO: EMS / Preparedness  
DEPARTMENT OR AGENCY NAME

10/1/2019  
DATE

*[Signature]*  
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 \* 011 = INCREASE IN APPROPRIATION / BOS APPROVED  
\* 003 = DECREASE ESTIMATED REVENUE \* 012 = DECREASE IN APPROPRIATION / BOS APPROVED

S F X	TRANS CODE NO.*	ORG	OBJ	PL	AMOUNT	DESCRIPTION <small>(50 CHARACTERS MAX.)</small>
1	11	0610100	3000	06FISCAL-C30SALBEN	\$ 36,833.00	ADD ADM ANALYST BOS 19-1488
2	11	0610100	3020	06FISCAL-C30SALBEN	\$ 3,499.00	ADD ADM ANALYST BOS 19-1488
3	11	0610100	3022	06FISCAL-C30SALBEN	\$ 534.00	ADD ADM ANALYST BOS 19-1488
4	11	0610100	3040	06FISCAL-C30SALBEN	\$ 17,386.00	ADD ADM ANALYST BOS 19-1488
5	11	0610100	3042	06FISCAL-C30SALBEN	\$ 92.00	ADD ADM ANALYST BOS 19-1488
6	2	0610100	1800	06AMB-INTER	\$ 58,344.00	ADD ADM ANALYST BOS 19-1488
7	11	1210150	5300		\$ 58,344.00	ADD ADM ANALYST BOS 19-1488
8	11	1210150	3000		\$ 28,454.00	ADD MED BILL TECH BOS 19-1488
9	11	1210150	3020		\$ 2,703.00	ADD MED BILL TECH BOS 19-1488
10	11	1210150	3022		\$ 413.00	ADD MED BILL TECH BOS 19-1488
11	11	1210150	3040		\$ 17,386.00	ADD MED BILL TECH BOS 19-1488
12	11	1210150	3042		\$ 71.00	ADD MED BILL TECH BOS 19-1488
13	11	1210150	4260		\$ 3,000.00	OFFICE SUPPLIES BOS 19-1488

REVIEWED FOR FORMAT BY

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

*[Signature]* 4/6/20  
CHIEF ADMINISTRATIVE OFFICE - ANALYST \_\_\_\_\_ 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 \_\_\_\_\_

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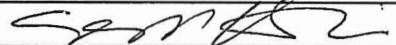
EL DORADO COUNTY APPROPRIATION TRANSFER ( 29130 GOV. CODE )

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S F X	TRANS CODE NO.*	ORG	OBJ	PL	AMOUNT	DESCRIPTION (50 CHARACTERS MAX.)
14	11	1210150	4503		\$ 4,000.00	STAFF DEV BOS 19-1488
15	11	1210150	4462		\$ 3,000.00	COMPUTER EQUIP BOS 19-1488
16	11	1210150	4461		\$ 2,000.00	MINOR EQUIP BOS 19-1488
17	11	1210150	4600		\$ 3,000.00	TRAVEL EQUIP BOS 19-1488
18	2	1210150	2020		\$ 122,371.00	OP TFR FROM CSAS BOS 19-1488
19	11	1210100	7000		\$ 22,565.00	OP TFR TO AMB BOS 19-1488
20	12	1210100	7700		\$ 22,565.00	OP TFR TO AMB BOS 19-1488
21	11	1210120	7000		\$ 99,806.00	OP TFR TO AMB BOS 19-1488
22	12	1210120	7700		\$ 99,806.00	OP TFR TO AMB BOS 19-1488
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CAO: *Pamela Ann Helton*