AUDITOR / CONTROLLER'S USE			EL DORADO COUNTY APPROPRIATION TRANSFER (29125 GOV. CODE)				
TRANSFER#			BUDGET TF	RANSFER REQUEST	DOCUMENT TOTAL	\$87,678.00	
JOURNAL #			BUDGET TRANSFER #1 - INCREASING TOTAL APPROPRIATIONS, REVENUES, OR		NUMBER OF LINES	2	
DATE			FIXED ASSETS REQUIRES BOS APPROVAL		NET TOTAL	\$0.00	
INPUT BY			BUDGET TRANSFER #2 - MOVING APPROPRIATIONS or REVENUE BETWEEN CLASSIFICATIONS REQUIRES CAO APPROVAL				
			<u> </u>	<i>"</i>			
тс	BE COMPLE	ETED BY DEPARTMENT	Budget Transfer Type:	Transfer 1: BoS Approval			
DEPT NAME Child Support Servicess		Child Support Servicess	Legistar Number & Date: 25-1535 1/6/2026				
DEPT CONTACT & EXT.		Lori Wood 7204	Ron Ladyge (Dec 17, PEDASTMENT SUT	راا		PAGE 1 OF 1	
			THORIZATION SIGNATURE AND DATE	DATE			
DIRECTIONS: 1. MEMO REQUIRED, IF BOS, INCLUDE A COPY OF THE LEGISTAR MASTER REPORT							

- 2. REMOVE THE GREEN COPY AND SUBMIT COMPLETED REQUEST TO THE CHIEF ADMINISTRATIVE OFFICE 3. IF BUDGET TRANSFER EXCEEDS 12 LINES, EMAIL EXCEL WORKBOOK TO APINTERFACES AND CAO ANALYST

S F X	Budget Rollup Code	ORG	OBJECT	PROJECT STRING	GL Project	INCREASE OR DECREASE (INC / DEC)	AMOUNT	DESCRIPTION (30 CHARACTERS MAX.)	
1		4000000	3000			DEC	\$ 43,839	Surveillance Cameras	
2		4000000	6040			INC	\$ 43,839	Ponderosa Road	
3									
4									
5									
6									
7									
8									
9									
10									
11									
12									
_	JOE HARN, C.P.A. AUDITOR / CONTROLLER DATE					APPROVED AND SO ORDERED THAT THE ABOVE TRANSFERS BE MADE (AS REQUESTED OR AMMENDED) 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: CHAIR, BOARD OF SUPERVISORS				
		CHII	ef administrat	IVE OFFICER DATE		ATTE	ST: CLERK, BOARD OF SUP	ERVISORS DATE	

S:\APFORMS\BUDGET TRANSFER 2.XLS

MEMO SHEET: BUDGET TRANSFER INFORMATION							
	IVIEN						
Department Name*	Child Support Servicess	Budget Transfer Type:	Transfer 1: BoS	Approval			
Clerk*	Lori Wood	Document total*	\$	87,678			
Contact phone*	5306427204						
BUDGET TRANSFER HEA	DER						
Prepared date*	01/00/00	Check Applicable*	One Time (after Adopted Budget)				
Fiscal year	2026		Continuing (include in the Adopted Budge	∍t)			
Short Description* (10 characters)	Cameras		_				
		Legistrar Item Number*	25-1535 1/6/2026				
* REQUIRED FIELDS		Project Strings Required*	•				
By signing this memo I h 1. information herein is to policies and procedures governmental regulation	true and accurate to the bes and <u>3.</u> all transfers approve	et of my knowledge, <u>2.</u> I ha d on this journal are in co	ve been delegated signature aumpliance with County policies a	nthority in accordance with County's and procedures and any other relevant			
		Authorized sig	nature*				
Ron Ladege (Dec 17, 2025 16:38:59	DCT)						
Non Lausge (Dec 17, 2023 10.30.33	· ·						
	BUDGET TRANSFER	JUSTIFICATION AND DE	SCRIPTION* (will be scanned into	FENIX TCM)			
for safety of staff and co				otage in the case of any incident and			
		FOR AUDITOR'S OF	FICE USE ONLY				
Audit date:			Budget Transfer number:				
Audited by:		-	Interfaced by:				
······································		-	Processed on:				