

AUDITOR / CONTROLLER'S USE

TRANSFER #

DATE

CODE BY

EL DORADO COUNTY APPROPRIATION TRANSFER (28130 GOV. CODE)

BUDGET TRANSFER REQUEST # 1

DOCUMENT TOTAL	21,700.00
NUMBER OF LINES	4
TRANSACTION CODE TOTAL *	36

Public Health *PK*

DEPARTMENT OR AGENCY NAME

06/13/07

DATE

Pat Barber

DEPARTMENT AUTHORIZATION SIGNATURE AND PHONE NUMBER

Barber/and 6151

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

LINE NO.	TRANS CODE	INDEX CODE NUMBER	SUB-OBJECT NUMBER	USER/DOB NUMBER	AMOUNT	DESCRIPTION	(60 CHARACTERS MAX)
1	002	403410	2020		5,425.00	FY 06/07 Bud Rev	CFMG
2	011	403410	4357		5,425.00		
3	012	151000	7300		5,425.00		
4	011	159210	7000		5,425.00		
5							
6							
7							
8							
9							
10							
11							
12							
13							

Mail overrun per contractual obligation

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 HARRN, C.P.A. AUDITOR / CONTROLLER DATE

CHIEF ADMINISTRATIVE OFFICE - ANALYST DATE

SIGNATURE: CHAIRMAN, BOARD OF SUPERVISORS DATE

CHIEF ADMINISTRATIVE OFFICE DATE

ATTEST: CLERK, BOARD OF SUPERVISORS

DISTRIBUTION: WHITE - BOS / YELLOW - AUDITOR / PINK - CHIEF ADMINISTRATIVE OFFICE / GOLD - DEPARTMENT