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EL DORADO COUNTY  
HEALTH AND HUMAN SERVICES AGENCY

**MEMO**

Date: April 4, 2019

To: Don Ashton  
CAO

From: Don Semon *DS*  
HHSA Director

Subject: Health and Human Services Agency Public Guardian Division Request to Process the Attached Budget Transfer

The Health and Human Services Agency (HHS), Public Guardian Division (PG), is requesting a budget transfer to increase appropriations to Other Governmental Agencies and to also draw down funds from the Audit Reserves that the CAO established in Dept. 15 in November of 2016. The reserve was in the amount of \$240K, of which \$59K was used in FY 2017-18 to pay a FY 2011-12 TCM cost report audit settlement. Due to a recent FY 2014-15 TCM site visit audit settlement, HHS is required to pay back \$37K for revenue that was received and disallowed during the audit. The audit reserve balance should be more than sufficient to support this transfer.

**Increase in Revenues:**

FENIX Org 1560600  
Object: 0003 – Fund Balance from Audit Reserves (\$37,000)  
PL String: NONE

**Increase in Appropriations:**

FENIX Org 5610100  
Object: 4337 – OTHER GOVERNMENTAL AGENCIES \$37,000  
PL String: 56PUBGUARD-56EXPNSE40-50500-WS

*Yok* Signature: *Don Semon* Date: 4-4-19

AUDITOR / CONTROLLER'S USE

TRANSFER # TR2019097

DATE

CODE BY

EL DORADO COUNTY APPROPRIATION TRANSFER ( 29130 GOV. CODE )

**BUDGET TRANSFER REQUEST #1**

HSA - Public Guardian

DEPARTMENT OR AGENCY NAME

*yex 4/4/19*

*Dell Sun*

DEPARTMENT AUTHORIZATION SIGNATURE AND PHONE NUMBER

TO BE COMPLETED BY THE DEPARTMENT

DOCUMENT TOTAL	-
NUMBER OF LINES	2
TRANSACTION CODE TOTAL*	NA

4/4/2019

DATE

PAGE 1 OF 1

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	D/C	FENIX Org	SUB OBJECT NUMBER	PL String	AMOUNT	DESCRIPTION (50 CHARACTERS MAX.)
1	D	5610100	4337	56PUBGUARD- 56EXPNSE40-50500-WS	37,000	FY 18-19 Inc OTHER GOVERNMENTAL AGENCIES ✓
2	C	1560600	0003		(37,000)	FY 18-19 GF Inc Fund Balance from Audit Reserve ✓
3						
4						
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6						
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11						
12						
13						

REVIEWED FOR FORMAT BY

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

CHIEF ADMINISTRATIVE OFFICE - ANALYST DATE

SIGNATURE: CHAIRMAN, BOARD OF SUPERVISORS DATE

CHIEF ADMINISTRATIVE OFFICE DATE

ATTEST: CLERK, BOARD OF SUPERVISORS

S:\APFORMS\BUDGET TRANSFER 1.

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