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|----------------------------|--|
| AUDITOR / CONTROLLER'S USE | |
| TRANSFER # | |
| DATE | |
| CODE BY | |

EL DORADO COUNTY APPROPRIATION TRANSFER (29130 GOV. CODE)

BUDGET TRANSFER REQUEST #1

HHS - Behavioral Health
DEPARTMENT OR AGENCY NAME

| | |
|-----------------------------------|----|
| TO BE COMPLETED BY THE DEPARTMENT | |
| DOCUMENT TOTAL | - |
| NUMBER OF LINES | 10 |
| TRANSACTION CODE TOTAL* | NA |

2/5/2020
DATE

ysk 
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 | D/C | FENIX Org | SUB OBJECT NUMBER | PL String | AMOUNT | DESCRIPTION (50 CHARACTERS MAX.) |
|-------------|-----|-----------|-------------------|----------------|-----------|--------------------------------------|
| 1 | C | 5380810 | 7700 | BUDGET-SUMMARY | (626,425) | FY 19-20 Dec Appro for Contingencies |
| 2 | D | 5380810 | 7000 | BUDGET-SUMMARY | 626,425 | FY 19-20 Inc Op Trsf Out |
| 3 | C | 5380800 | 7700 | BUDGET-SUMMARY | (244,345) | FY 19-20 Dec Appro for Contingencies |
| 4 | D | 5380800 | 7000 | BUDGET-SUMMARY | 244,345 | FY 19-20 Inc Op Trsf Out |
| 5 | C | 5320210 | 7700 | BUDGET-SUMMARY | (1,117) | FY 19-20 Dec Appro for Contingencies |
| 6 | D | 5320210 | 7250 | BUDGET-SUMMARY | 1,117 | FY 19-20 Inc Intrafund Trsf Out |
| 7 | C | 5320215 | 7700 | BUDGET-SUMMARY | (3,067) | FY 19-20 Dec Appro for Contingencies |
| 8 | D | 5320215 | 7250 | BUDGET-SUMMARY | 3,067 | FY 19-20 Inc Intrafund Trsf Out |
| 9 | C | 5320220 | 7700 | BUDGET-SUMMARY | (612) | FY 19-20 Dec Appro for Contingencies |
| 10 | D | 5320220 | 7250 | BUDGET-SUMMARY | 612 | FY 19-20 Inc Intrafund Trsf Out |
| 11 | | | | | | |
| 12 | | | | | | |
| 13 | | | | | | |

Legistar 20-0196
2/25/2020

REVIEWED FOR FORMAT BY

JOE HARN, C.P.A. AUDITOR / CONTROLLER DATE
Melhi B. Purnell *2/11/2020*
CHIEF ADMINISTRATIVE OFFICE - ANALYST 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

CHIEF ADMINISTRATIVE OFFICE DATE ATTEST: CLERK, BOARD OF SUPERVISORS

