

AUDITOR / CONTROLLER'S USE	
TRANSFER #	TR2023091
JOURNAL #	2023-10-1128
DATE	04-01-23
INPUT BY	<i>[Signature]</i>

EL DORADO COUNTY APPROPRIATION TRANSFER (29126 GOV. CODE)

BUDGET TRANSFER REQUEST

BUDGET TRANSFER #1 - INCREASING TOTAL APPROPRIATIONS, REVENUES, OR FIXED ASSETS REQUIRES BOS APPROVAL

BUDGET TRANSFER #2 - MOVING APPROPRIATIONS or REVENUE BETWEEN CLASSIFICATIONS REQUIRES CAO APPROVAL

DOCUMENT TOTAL	\$2,000,000.00
NUMBER OF LINES	2
NET TOTAL	\$0.00
<i>BOS APPROVED ON 4/14/23. MOVING FUNDS FROM PROFESSIONAL SRV, TO FA DESIGN SERVICES. CONFIRMED AVAILABLE FUNDS. REVIEWED BY MA 4/25/23.</i>	
1/20/2023	PAGE 1 OF 1

TO BE COMPLETED BY DEPARTMENT	
DEPT NAME	CAO: Parks

Budget Transfer Type: Transfer 1: BoS Approval

Legistar Number & Date: 23-0089 274/23 4/14/23

DEPT CONTACT & EXT.	Ambria Hamilton x5147
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Tiffany A Schmid
Tiffany A Schmid (Jan 26, 2023 08:11 PST)

DEPARTMENT AUTHORIZATION SIGNATURE AND DATE

DATE

DIRECTIONS:

- MEMO REQUIRED, IF BOS, INCLUDE A COPY OF THE LEGISTAR MASTER REPORT
- REMOVE THE GREEN COPY AND SUBMIT COMPLETED REQUEST TO THE CHIEF ADMINISTRATIVE OFFICE
- 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	06400	0620200	4300	06SPORTS-C40SERSUP		DEC \$	1,000,000	DEC SER/SUP SPORTS COMPLEX
2	06600	0620200	6021	06SPORTS-C60FA		INC \$	1,000,000	INC FA SPORTS COMPLEX
3								
4								
5								
6								
7								
8				<i>Deanond Springs sports complex</i>				
9								
10								
11								
12								

<i>[Signature]</i> JOE HARN, C.P.A. AUDITOR / CONTROLLER	DATE <i>[Signature]</i>
<i>[Signature]</i> CHIEF ADMINISTRATIVE OFFICE - ANALYST	DATE 4/13/23
<i>[Signature]</i> CHIEF ADMINISTRATIVE OFFICER	DATE 5/19/23

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	
<i>[Signature]</i> SIGNATURE: CHAIR, BOARD OF SUPERVISORS	DATE 5-4-23
<i>[Signature]</i> ATTEST: CLERK, BOARD OF SUPERVISORS	DATE 5-4-23

S:\APFORMS\BUDGET TRANSFER 2.XLS