

BUDGET TRANSFER REQUEST

AUDITOR / CONTROLLER'S USE	
TRANSFER #	
JOURNAL #	
DATE	
INPUT BY	

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	\$84,000.00
NUMBER OF LINES	2
NET TOTAL	\$0.00

TO BE COMPLETED BY DEPARTMENT	
DEPT NAME	CAO Admin & Budget

Budget Transfer Type:	Transfer 1: BoS Approval
Legistar Number & Date:	22-0083 1/25/22

DEPT CONTACT & EXT.	Sue Hennike, 5577
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[Signature] 1/16/22
 DEPARTMENT AUTHORIZATION SIGNATURE AND DATE

1/3/2022	PAGE 1 OF 1
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		1530300	7700			DEC	\$ 42,000	DEC GF Contingency
2		1520200	5240	150A-15SP		INC	\$ 42,000	INC Contrib. Other Govn Agency
3								
4								
5								
6								
7								
8								
9								
10								
11								
12								

<i>[Signature]</i> JOE HARN, C.P.A. AUDITOR / CONTROLLER	DATE 1/16/22
<i>[Signature]</i> CHIEF ADMINISTRATIVE OFFICE - ANALYST	DATE
CHIEF ADMINISTRATIVE OFFICER	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

SIGNATURE: CHAIR, BOARD OF SUPERVISORS	DATE
ATTEST: CLERK, BOARD OF SUPERVISORS	DATE

MEMO SHEET: BUDGET TRANSFER INFORMATION

Department Name*	CAO Admin & Budget	Budget Transfer Type:	Transfer 1: BoS Approval
Clerk*	Sue Hennike	Document total*	\$ 84,000
Contact phone*	530-621-5577		

BUDGET TRANSFER HEADER

Prepared date*	01/03/22	Check Applicable* <input checked="" type="checkbox"/> One Time (after Adopted Budget) <input type="checkbox"/> Continuing (include in the Adopted Budget)
Fiscal year	FY 2021-22	
Short Description* <small>(10 characters)</small>	MEEKS BAY	
	Registrar Item Number*	22-0083 1/25/22

* REQUIRED FIELDS

Project Strings Required	Yes
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By signing this memo I hereby certify that:

1. information herein is true and accurate to the best of my knowledge, 2. I have been delegated signature authority in accordance with County's policies and procedures and 3. all transfers approved on this journal are in compliance with County policies and procedures and any other relevant governmental regulations.

Authorized signature*



BUDGET TRANSFER JUSTIFICATION AND DESCRIPTION* (will be scanned into FENIX TCM)

This budget transfer reduces General Fund Contingency by \$42,000 and increases Contribution to Non-County Governmental Agencies appropriations in the General Fund (Department 15) by \$42,000. The funding to will used for an agreement that will reimburse costs incurred in the reorganization of the Meeks Bay Fire Protection District into the North Tahoe Fire Protection District.

FOR AUDITOR'S OFFICE USE ONLY

Audit date:	_____	Budget Transfer number:	_____
Audited by:	_____	Interfaced by:	_____
		Processed on:	_____