

BUDGET TRANSFER REQUEST #1

TO BE COMPLETED BY THE DEPARTMENT	
DOCUMENT TOTAL	-
NUMBER OF LINES	4
TRANSACTION CODE TOTAL*	

AUDITOR / CONTROLLER'S USE	
TRANSFER #	
DATE	
CODE BY	

Department of Transportation & Chief Administrative Office

DEPARTMENT OR AGENCY NAME

LEGISTAR # 19-1090

7/9/2019
DATE

BM R Martinez
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
- * 003 = DECREASE ESTIMATED REVENUE

- * 011 = INCREASE IN APPROPRIATION / BOS APPROVED
- * 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	1550500	7000	15GF-15TD	296,000	FY 18-19 INC OPERATING TRANSFER OUT NEG INTEREST
2	C	1560600	0003	N/A	(296,000)	FY 18-19 INC DSGNTN RD INFRA FOR NEG INTEREST
3	C	3600010	2020	36001000-36LOCAL-36GENFUND-36GENERAL	(296,000)	FY 18-19 INC OPERATING TRANSFER IN NEG INTEREST
4	D	3600010	0400	36001000-36LOCAL-36INTEREST-36GENERAL	296,000	FY 18-19 DEC INTEREST REVENUE FOR NEG INTEREST
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						Prepared by: Sarah Beal

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
