

AUDITOR / CONTROLLER'S USE	
TRANSFER #	
DATE	
CODE BY	

# BUDGET TRANSFER REQUEST #1

Library  
DEPARTMENT OR AGENCY NAME

TO BE COMPLETED BY THE DEPARTMENT	
DOCUMENT TOTAL	50,000.00
NUMBER OF LINES	12
TRANSACTION CODE TOTAL*	114

10-1-08  
DATE

*Jeanne Arma* x5546  
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	TRANS CODE NO.*	INDEX CODE NUMBER	SUB OBJECT NUMBER	USER CODE NUMBER	AMOUNT	DESCRIPTION <small>(50 CHARACTERS MAX.)</small>
1	002	601100	0880		8,500.00	FY 08/09 BUD ALLOC ELF GRANT
2	002	601100	1100		16,500.00	FY 08/09 BUD ALLOC ELF GRANT
3	011	601100	3001		5,100.00	FY 08/09 BUD ALLOC ELF GRANT EXTRA HELP
4	011	601100	4260		500.00	FY 08/09 BUD ALLOC ELF GRANT SUPPLIES
5	011	601100	4266		1,500.00	FY 08/09 BUD ALLOC ELF GRANT PRINTING
6	011	601100	4461		800.00	FY 08/09 BUD ALLOC ELF GRANT MINOR EQUIP
7	011	601100	4501		10,000.00	FY 08/09 BUD ALLOC ELF GRANT SPEC PROJECTS
8	011	601100	4516		2,400.00	FY 08/09 BUD ALLOC ELF GRANT BOOKS
9	011	601100	4517		2,200.00	FY 08/09 BUD ALLOC ELF GRANT AUDIO
10	011	601100	4540		750.00	FY 08/09 BUD ALLOC ELF GRANT STAFF DEV
11	011	601100	4602		250.00	FY 08/09 BUD ALLOC ELF GRANT MILEAGE
12	011	601100	7232		1,500.00	FY 08/09 BUD ALLOC ELF GRANT BLDG MAINT
13						

REVIEWED FOR  
FORMAT BY

JOE HARN, C.P.A. AUDITOR / CONTROLLER \_\_\_\_\_ DATE \_\_\_\_\_

CHIEF ADMINISTRATIVE OFFICE - ANALYST \_\_\_\_\_ DATE \_\_\_\_\_

CHIEF ADMINISTRATIVE OFFICE \_\_\_\_\_ 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 \_\_\_\_\_

ATTEST: CLERK, BOARD OF SUPERVISORS \_\_\_\_\_