

AUDITOR / CONTROLLER'S USE

EL DORADO COUNTY APPROPRIATION TRANSFER (29125 GOV. CODE)

BUDGET TRANSFER REQUEST

TRANSFER #	
JOURNAL #	
DATE	
INPUT BY	

DOCUMENT TOTAL	\$40,000.00
NUMBER OF LINES	2
NET TOTAL	\$0.00

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

TO BE COMPLETED BY DEPARTMENT	
DEPT NAME	HHSA-Animal Services, Dept 55

Budget Transfer Type:	Transfer 1: BoS Approval
Legistar Number & Date:	Legistar #23-2164 Date: 01/23/2024

DEPT CONTACT & EXT.	Kimmi McAdams
---------------------	---------------


Olivia Byron-Cooper (Nov 22, 2023 10:19 PST) Nov 22, 2023

11/20/2023 PAGE 1 OF 1
DATE

DEPARTMENT AUTHORIZATION SIGNATURE AND DATE

DIRECTIONS:

1. MEMO REQUIRED, IF BOS, INCLUDE A COPY OF THE LEGISTAR MASTER REPORT
2. REMOVE THE GREEN COPY AND SUBMIT COMPLETED REQUEST TO THE CHIEF ADMINISTRATIVE OFFICE
3. 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	55600	5500000	6040	BUDGET-SUMMARY		INC	\$ 20,000	FY 23/24 Inc Exp FA Dog Box
2	55300	5500000	3000	BUDGET-SUMMARY		DEC	\$ 20,000	FY 23/24 Dec Exp Perm Emp
3								
4								
5								
6								
7								
8								
9								
10								
11								
12								

23-2164 A 1 of 2

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

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*	HHSA-Animal Services, Dept 5	Budget Transfer Type:	Transfer 1: BoS Approval
Clerk*	Maki Ganno	Document total*	\$ 40,000
Contact phone*	642-4893		

BUDGET TRANSFER HEADER

Prepared date*	11/20/23	Check Applicable*	<input checked="" type="checkbox"/> One Time (after Adopted Budget)
Fiscal year	FY 23/24		<input type="checkbox"/> Continuing (include in the Adopted Budget)
Short Description* <small>(10 characters)</small>	ASFA	Legistar Item Number*	Legistar #23-2164 Date: 01/23/2024
* REQUIRED FIELDS		Project Strings Required*	Yes

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*	
 Olivia Byron-Cooper (Nov 22, 2023 10:19 PST)	 Olivia Byron-Cooper (Nov 22, 2023 10:19 PST)

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

The Health and Human Services Agency (HHSA), Animal Services Division (ASD), is requesting a budget transfer increasing appropriations for Fixed Assets for an item that is already on the approved fixed asset list. The dog box that was budgeted at \$45K using a previous estimate is now currently quoted at \$65K, therefore, \$20K in savings from staffing vacancies is being requested to be shifted to cover the increased cost.

There is no additional NCC associated with this budget transfer.

FOR AUDITOR'S OFFICE USE ONLY

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