

<b>AUDITOR / CONTROLLER'S USE</b>		EL DORADO COUNTY APPROPRIATION TRANSFER ( 29125 GOV. CODE )		<h1 style="margin:0;">BUDGET TRANSFER REQUEST</h1>		DOCUMENT TOTAL	\$177,000.00
TRANSFER #		<b>BUDGET TRANSFER #1 - INCREASING TOTAL APPROPRIATIONS, REVENUES, OR FIXED ASSETS REQUIRES BOS APPROVAL</b>  <b>BUDGET TRANSFER #2 - MOVING APPROPRIATIONS or REVENUE BETWEEN CLASSIFICATIONS REQUIRES CAO APPROVAL</b>				NUMBER OF LINES	2
JOURNAL #						NET TOTAL	\$0.00
DATE							
INPUT BY							
<b>TO BE COMPLETED BY DEPARTMENT</b>				<b>Budget Transfer Type:</b>	Transfer 1: BoS Approval		
DEPT NAME	Planning and Building			<b>Legistar Number &amp; Date:</b>	24-0326 04/02/24		
DEPT CONTACT & EXT.	Stephanie Lisius X 5851			 <small>Karen L. Garner (Mar 15, 2024 14:40 PDT)</small>		3/12/2024	PAGE 1 OF 1
				DEPARTMENT AUTHORIZATION SIGNATURE AND DATE		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		3725250	1768	37250000-37BUDGET		INC	\$ 88,500	INCREASE TRPA REV TAHOE PLAN
2	37400	3725250	4300	37250000-37BUDGET		INC	\$ 88,500	INCREASE PROF SERV TAHOE PLAN
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11								
12								

<p>_____</p> <p style="text-align:center;">JOE HARN, C.P.A. AUDITOR / CONTROLLER      DATE</p> <p>_____</p> <p style="text-align:center;">CHIEF ADMINISTRATIVE OFFICE - ANALYST      DATE</p> <p>_____</p> <p style="text-align:center;">CHIEF ADMINISTRATIVE OFFICER      DATE</p>	<p>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</p> <p>_____</p> <p style="text-align:center;">SIGNATURE: CHAIR, BOARD OF SUPERVISORS      DATE</p> <p>_____</p> <p style="text-align:center;">ATTEST: CLERK, BOARD OF SUPERVISORS      DATE</p>
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**MEMO SHEET: BUDGET TRANSFER INFORMATION**

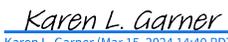
<b>Department Name*</b>	Planning and Building	<b>Budget Transfer Type:</b>	<b>Transfer 1: BoS Approval</b>
<b>Clerk*</b>	Stephanie Lisius	<b>Document total*</b>	<b>\$ 177,000</b>
<b>Contact phone*</b>	5851		

**BUDGET TRANSFER HEADER**

<b>Prepared date*</b>	03/12/24	<b>Check Applicable*</b>	<input checked="" type="checkbox"/> One Time (after Adopted Budget)
<b>Fiscal year</b>	23/24		<input type="checkbox"/> Continuing (include in the Adopted Budget)
<b>Short Description*</b> <small>(10 characters)</small>	TRPAINC		
		<b>Registrar Item Number*</b>	24-0326 04/02/24
<b>* REQUIRED FIELDS</b>		<b>Project Strings Required:</b>	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\***

  
 Karen L. Garner (Mar 15, 2024 14:40 PDT)

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

Planning and Building Department, Tahoe Planning, Stormwater, and VHR Division (Department) is requesting a budget transfer increasing professional services by \$88,500 which will be offset by an increase to Tahoe Regional Planning Agency revenue in the same amount.

The Department and the Tahoe Regional Planning Agency (TRPA) are entering into a Cooperation Agreement that will allow the County to provide project management services for Phase 1 of the development of a Meyers Aquatic Invasive Species Station in Meyers, with TRPA as the project proponent and funder. There is no change to Net County cost associated with this Cooperation Agreement. TRPA will reimburse the Department for consultant services and staff time.

**FOR AUDITOR'S OFFICE USE ONLY**

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