
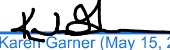


AUDITOR / CONTROLLER'S USE		EL DORADO COUNTY APPROPRIATION TRANSFER (29125 GOV. CODE)		<h1>BUDGET TRANSFER REQUEST</h1>		DOCUMENT TOTAL	\$400,000.00	
TRANSFER #		BUDGET TRANSFER #1 - INCREASING TOTAL APPROPRIATIONS, REVENUES, OR FIXED ASSETS REQUIRES BOS APPROVAL BUDGET TRANSFER #2 - MOVING APPROPRIATIONS or REVENUE BETWEEN CLASSIFICATIONS REQUIRES CAO APPROVAL				NUMBER OF LINES	4	
JOURNAL #						NET TOTAL	\$0.00	
DATE								
INPUT BY								
TO BE COMPLETED BY DEPARTMENT				Budget Transfer Type:	Transfer 1: BoS Approval			
DEPT NAME	Planning and Building	Legistar Number & Date:		26-0898 05/19/26				
DEPT CONTACT & EXT.	Stephanie Lisius x 5851	 <small>Madeline Morton</small>	 <small>Karen Garner (May 15, 2026 12:17:03 PDT)</small>	5/15/2026	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	36V12	3770706	7700			DEC	\$ 100,000	DEC CONTINGENCY
2	37036	3770706	7000			INC	\$ 100,000	INC OPER XFER OUT
3		3750500	2020	37500000-37BUDGET		INC	\$ 100,000	INC OPER XFER IN
4	374000	3750500	4300	37500000-37BUDGET		INC	\$ 100,000	IN PROF SERVICES
5								
6								
7								
8								
9								
10								
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

Department Name*	Planning and Building	Budget Transfer Type:	Transfer 1: BoS Approval
Clerk*	Stephanie Lisius	Document total*	\$ 400,000
Contact phone*	5851		

BUDGET TRANSFER HEADER

Prepared date*	05/15/26	Check Applicable* <input checked="" type="checkbox"/>	
Fiscal year	25/26		
Short Description* <small>(10 characters)</small>	INCOPXFER		
		Registrar Item Number*	26-0898 05/19/26
* 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.

 Madeleine Morton	Authorized signature*  Karen Garner (May 15, 2026 12:17:03 PDT)
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BUDGET TRANSFER JUSTIFICATION AND DESCRIPTION* (will be scanned into FENIX TCM)

As per Board Item 26-0898, Planning and Building Department, Code Enforcement Division is requesting a budget transfer decreasing contingency and increasing operating transfers out from the Abate Dangerous Buildings fund, as well as increasing operating transfers in and professional services in the Code Enforcement Org.

FOR AUDITOR'S OFFICE USE ONLY

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