

AUDITOR / CONTROLLER'S USE	
TRANSFER #	
DATE	
CODE BY	

BUDGET TRANSFER REQUEST #1

TO BE COMPLETED BY THE DEPARTMENT	
DOCUMENT TOTAL	102,576.00
NUMBER OF LINES	3
TRANSACTION CODE TOTAL*	024

TRANSPORTATION
DEPARTMENT OR AGENCY NAME

DEPARTMENT AUTHORIZATION SIGNATURE AND PHONE NUMBER

3/22/2007
DATE

**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 (50 CHARACTERS MAX.)
1	011	308604	4303		48,888.00	FY 07/08 BUD REV MCALLISTER PARCEL MAP
2	011	308604	5300		2,400.00	FY 07/08 BUD REV MCALLISTER PARCEL MAP
3	002	308604	1943		51,288.00	FY 07/08 BUD REV MCALLISTER CONTRIBUTION
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						

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