



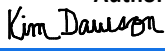
**MEMO SHEET: BUDGET TRANSFER INFORMATION**

<b>Department Name*</b>	BOARD OF SUPERVISORS	<b>Budget Transfer Type:</b>	Transfer 1: BoS Approval
<b>Clerk*</b>	SCOTT FLINT <i>SF</i>	<b>Document total*</b>	\$ 190,000
<b>Contact phone*</b>	x5605		

**BUDGET TRANSFER HEADER**

<b>Prepared date*</b>	05/18/26	<b>Check Applicable*</b> <input checked="" type="checkbox"/> One Time (after Adopted Budget) <input type="checkbox"/> Continuing (include in the Adopted Budget)	
<b>Fiscal year</b>	25/26		
<b>Short Description*</b> <small>(10 characters)</small>	BOS SAL		
		<b>Legistrar Item Number*</b>	6/9/2026 26-0912
<b>* REQUIRED FIELDS</b>		<b>Project Strings Required</b>	No

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.

 JC	 Jeremy Apodaca	Authorized signature*  Kim Dawson (May 22, 2026 09:04:23 PDT)
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**BUDGET TRANSFER JUSTIFICATION AND DESCRIPTION\*** (will be scanned into FENIX TCM)

The Board of Supervisors salaries and benefits is expected to exceed appropriations prior to the end of FY25/26. This budget transfer makes several adjustments to move funds from services and supplies into salaries as well as a small amount to intrafund transfers for unbilled facilities service requests. The remaining \$30,000 transfer amount is requested from General Fund Contingency.

Lines 1-3: Moves appropriations from budget savings from professional services and office expenses to salaries & benefits.

Lines 4-9: Moves appropriations from various services & supply objects to salaries & benefits. Line 5 reduces General Fund contingency and transfers it to salaries & benefits.

Lines 10-11: Moves appropriations from services and supplies to intrafund transfers for facilities service requests.

**FOR AUDITOR'S OFFICE USE ONLY**

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

<b>AUDITOR / CONTROLLER'S USE</b>		EL DORADO COUNTY APPROPRIATION TRANSFER ( 29125 GOV. CODE )		<h1 style="margin:0;">BUDGET TRANSFER REQUEST</h1>		DOCUMENT TOTAL	<b>\$190,000.00</b>
TRANSFER #		BUDGET TRANSFER #1 - INCREASING TOTAL APPROPRIATIONS, REVENUES, OR FIXED ASSETS REQUIRES BOS APPROVAL				NUMBER OF LINES	<b>11</b>
JOURNAL #						NET TOTAL	<b>\$0.00</b>
DATE							
INPUT BY		BUDGET TRANSFER #2 - MOVING APPROPRIATIONS or REVENUE BETWEEN CLASSIFICATIONS REQUIRES CAO APPROVAL					
<b>TO BE COMPLETED BY DEPARTMENT</b>				Budget Transfer Type:	Transfer 1: BoS Approval		
DEPT NAME	BOARD OF SUPERVISORS			Legistar Number & Date:	6/9/2026 26-0912		
DEPT CONTACT & EXT.	SCOTT FLINT x5605	Kim Dawson	 <small>Kim Dawson (May 22, 2026 09:04:23 PDT)</small>	5/18/2026	PAGE 1 OF 1		
		<small>DEPARTMENT AUTHORIZATION SIGNATURE AND DATE</small>		<small>DATE</small>			

	 <u>Jeremy Apodaca</u>	<b>DIRECTIONS:</b>	<ol style="list-style-type: none"> <li>1. MEMO REQUIRED, IF BOS, INCLUDE A COPY OF THE LEGISTAR MASTER REPORT</li> <li>2. REMOVE THE GREEN COPY AND SUBMIT COMPLETED REQUEST TO THE CHIEF ADMINISTRATIVE OFFICE</li> <li>3. IF BUDGET TRANSFER EXCEEDS 12 LINES, EMAIL EXCEL WORKBOOK TO APINTERFACES AND CAO ANALYST</li> </ol>
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S F X	Budget Rollup Code	ORG	OBJECT	PROJECT STRING	GL Project	INCREASE OR DECREASE (INC / DEC)	AMOUNT	DESCRIPTION <small>(30 CHARACTERS MAX.)</small>
1	01400	0110100	4300			DEC	\$ 45,000	DEC PROF SVCS DIGITIZATION
2	01400	0110100	4260			DEC	\$ 2,500	DEC OFF EXP
3	01300	0110100	3000			INC	\$ 47,500	INC SALARIES-BENEFITS
4	01300	0100000	3000			INC	\$ 46,000	INC SALARIES-BENEFITS
5	15V00	1530300	7700			DEC	\$ 30,000	DEC GF CONTINGENCY BOS SALARY
6	01400	0100000	4300			DEC	\$ 5,000	DEC PROF SVCS
7	01400	0100000	4260			DEC	\$ 2,500	DEC OFF EXP
8	01400	0100000	4650			DEC	\$ 2,000	DEC OVERNIGHT TRVL REG
9		0100000	1740			INC	\$ 6,500	INC AAB REVENUES
10	01400	0100000	4260			DEC	\$ 1,500	DEC OFF EXP
11	01Q00	0100000	7232		FAC	INC	\$ 1,500	INC FACILITIES SVC REQS
12								

<p>_____ JOE HARN, C.P.A. AUDITOR / CONTROLLER      DATE</p> <p>_____ CHIEF ADMINISTRATIVE OFFICE - ANALYST      DATE</p> <p>_____ CHIEF ADMINISTRATIVE OFFICER      DATE</p>	<p>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</p> <p>_____ SIGNATURE: CHAIR, BOARD OF SUPERVISORS      DATE</p> <p>_____ ATTEST: CLERK, BOARD OF SUPERVISORS      DATE</p>
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