AUDITO		ZOIGOOG		EL DORADO COUNTY APPROPRIATION TRANSFER (29130 GOV. CODE) BUDGET TRANSFER REQUEST # 1						TO BE COMPLETED BY THE DEPARTMENT			
									# 1	DOCUN	IENT TOTAL	3,000,000	
DATE					HR- Risk					NUMBE	R OF LINES	4	
CODE BY					DEPARTMENT OR AGENCY NAME				9		CTION CODE	263681	
7-9-15 DATE				26	DEPARTMENT AUTI	XV553	U553 RIZATION SIGNATURE AND PHONE NUMBER					PAGE OF _	
COMPLETE THE INFORMATION BELOW, WITH JUSTIFICATION NARRATIVE OR ATTACH A MEMO. REMOVE THE GOLD COPY AND SUBMIT COMPLETED REQUEST TO THE AUDITOR / CONTROLLER'S OFFICE. A BUDGET TRANSFER REQUEST 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												SACTION CODE *	
S H X	TRANS CODE NO.	NUMBER	SUB-OBJECT NUMBER	UPER GOLDE NUMBER	AMOUNT			DESCRI	rtian		(60 OHARA)	STERS MAX)	
4	002 v	083524	0001		\$750,000	FY	15-16	ESI	Ret	Health	Reimb H	eath Fund	
2,	0110	083524	7250		\$ 750,000	11						11	
3	011	083522	7380		\$ 750,000 \$ 750,000	11				****		//	
5	Ulli	083322	4104		\$ 750,000	,,						//	
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12		/								P. C. C. C.		5 6	
13			11	,	20100	APPRO	VED AND S	O ORDERI	D THAT T	HE ABOVE TO	PANSFERS RE MA	NDE (AS REQUESTED OR	
REVIEWED FOR ORMAT BY	J	DE HARN, C.P.A. AU	mesto	7	DATE 19/15 DATE	AME	NDED) ANI	O INCORPO SUPE	RATED IN RVISORS C	THE MINUTES OF THE COUN	S OF THIS MEETIN	IG OF THE BOARD.OF	
	C	CHIEF ADMINIST			DATE LOW - AUDITOR / PINK	C-CHIEF AD	MINISTRAT	1-0-	CLERK, BO	DARD OF SUF			