

BUDGET TRANSFER REQUEST # 1

CAD - Dev Services
DEPARTMENT OR AGENCY NAME

AUDITOR / CONTROLLER'S USE	
TRANSFER #	
DATE	
CODE BY	

TO BE COMPLETED BY THE DEPARTMENT	
DOCUMENT TOTAL	188,000
NUMBER OF LINES	9
TRANSACTION CODE TOTAL *	64

6-10-08
DATE

Kawa Schwartz
DEPARTMENT AUTHORIZATION SIGNATURE AND PHONE NUMBER

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
- * 003 = DECREASE ESTIMATED REVENUE
- * 011 = INCREASE IN APPROPRIATION / BOS APPROVED
- * 012 = DECREASE IN APPROPRIATION / BOS APPROVED

S E R I A L	TRANS CODE NO. *	INDEX CODE NUMBER	SUB OBJECT NUMBER	USER CODE NUMBER	AMOUNT	DESCRIPTION (80 CHARACTERS MAX)
1	002	7727300	0220		42,000	FY 07-08 Rev adj
2	011	7727300	7000		42,000	
3	002	341000	2020		42,000	
4	011	151000	7700		42,000	
5	012	7729304	4500		5,000	
6	011	7729304	7000		5,000	
7	002	341000	2020		3,000	
8	002	345000	2020		2,000	
9	011	151000	7700		5,000	
10						
11						
12						
13						

08-0925

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