

TRANSFER #	
DATE	
CODE BY	

BUDGET TRANSFER REQUEST #1

DOCUMENT TOTAL	120,000.00
NUMBER OF LINES	4
TRANSACTION CODE TOTAL*	000

Chief Administrative Office, Community Development Airports Division

DEPARTMENT OR AGENCY NAME
LEGISTAR # 20-0594

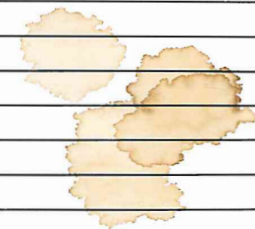
4/30/2020
DATE

DEPARTMENT AUTHORIZATION SIGNATURE AND PHONE NUMBER

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

S F X	D/C	FENIX Org	SUB OBJECT NUMBER	PL String	AMOUNT	DESCRIPTION (50 CHARACTERS MAX.)
1	C	3540410	1100	35400020-35FEDERAL-35CARES	30,000.00	FY 19-20 CARES ACT GRANT INC FEDERAL OTHER
2	D	3540410	4300	35400020-35OPSMNT	30,000.00	FY 19-20 CARES ACT GRANT INC PROFESSIONAL SERVICES
3	C	3540420	1100	35400030-35FEDERAL-35CARES	30,000.00	FY 19-20 CARES ACT GRANT INC FEDERAL OTHER
4	D	3540420	4300	35400030-35OPSMNT	30,000.00	FY 19-20 CARES ACT GRANT INC PROFESSIONAL SERVICES
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22						



REVIEWED FOR FORMAT BY

JOE HARN, C.P.A. AUDITOR / CONTROLLER

DATE

CHIEF ADMINISTRATIVE OFFICE - ANALYST

5/27/20
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

CAD MAY 22 '20 PM 2:33

SIGNATURE: CHAIRMAN, BOARD OF SUPERVISORS DATE

CHIEF ADMINISTRATIVE OFFICE

DATE

ATTEST: CLERK, BOARD OF SUPERVISORS