

EL DORADO COUNTY APPROPRIATION TRANSFER ( 29130 GOV. CODE )

**BUDGET TRANSFER REQUEST #1**

TO BE COMPLETED BY THE DEPARTMENT

AUDITOR / CONTROLLER'S USE	DOCUMENT TOTAL	3,000,000.00
TRANSFER #	NUMBER OF LINES	2
DATE	TRANSACTION CODE TOTAL*	13
CODE BY		

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DEPARTMENT OR AGENCY NAME

Human Services - Community Services Div

DEPARTMENT AUTHORIZATION SIGNATURE AND PHONE NUMBER

*[Signature]* 6163

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  
 \* 003 = DECREASE ESTIMATED REVENUE  
 \* 011 = INCREASE IN APPROPRIATION / BOS APPROVED  
 \* 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	002	531231	0880		1,500,000.00	FY 07/08 Bud Rev Establish CalHFA HELP Loan	
2	011	531231	4501		1,500,000.00	FY 07/08 Bud Rev Establish CalHFA HELP Loan	
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							

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

REVIEWED FOR FORMAT BY \_\_\_\_\_

JOE HARN, C.P.A. AUDITOR / CONTROLLER \_\_\_\_\_ DATE \_\_\_\_\_

CHIEF ADMINISTRATIVE OFFICE - ANALYST \_\_\_\_\_ DATE \_\_\_\_\_

SIGNATURE: CHAIRMAN, BOARD OF SUPERVISORS \_\_\_\_\_ DATE \_\_\_\_\_

CHIEF ADMINISTRATIVE OFFICE \_\_\_\_\_

ATTEST: CLERK, BOARD OF SUPERVISORS \_\_\_\_\_

DISTRIBUTION: WHITE - BOS / YELLOW - AUDITOR / PINK - CHIEF ADMINISTRATIVE OFFICE / GOLD - DEPARTMENT

S:\APFORMS\BUDGET TRANSFER 1.XLS