

AUDITOR / CONTROLLER'S USE

EL DORADO COUNTY APPROPRIATION TRANSFER (29125 GOV. CODE)

BUDGET TRANSFER REQUEST

TRANSFER # **TR-2024/133**
 JOURNAL # **2024-12-2020**
 DATE **06-18-24**
 INPUT BY **[Signature]**

BUDGET TRANSFER #1 - INCREASING TOTAL APPROPRIATIONS, REVENUES, OR FIXED ASSETS REQUIRES BOS APPROVAL
 BUDGET TRANSFER #2 - MOVING APPROPRIATIONS or REVENUE BETWEEN CLASSIFICATIONS REQUIRES CAO APPROVAL

DOCUMENT TOTAL **\$140,000.00**
 NUMBER OF LINES **4**
 NET TOTAL **\$0.00**

**CONFIRMED AVAILABLE FUNDS
 MAY 6/13/24.**

TO BE COMPLETED BY DEPARTMENT
 DEPT NAME **Planning and Building**

Budget Transfer Type: **Transfer 1: BoS Approval**

Legistar Number & Date: **24-1003 06/25/24**

DEPT CONTACT & EXT. **Stephanie Lisius X 5851**

[Signature] **[Signature]** **Karen L. Garner**
LS MM Karen L. Garner (May 29, 2024 08:36 PDT)

5/21/2024 **PAGE 1 OF 1**

DEPARTMENT AUTHORIZATION SIGNATURE AND DATE

DATE

DIRECTIONS:

- MEMO REQUIRED, IF BOS, INCLUDE A COPY OF THE LEGISTAR MASTER REPORT
- REMOVE THE GREEN COPY AND SUBMIT COMPLETED REQUEST TO THE CHIEF ADMINISTRATIVE OFFICE
- IF BUDGET TRANSFER EXCEEDS 12 LINES, EMAIL EXCEL WORKBOOK TO APINTERFACES AND CAO ANALYST

S F X	Budget Rollup Code	ORG	OBJECT	PROJECT STRING	GL Project	INCREASE OR DECREASE (INC / DEC)	AMOUNT	DESCRIPTION (30 CHARACTERS MAX.)
1	37V61	3770740	7700			DEC	\$ 35,000	DEC CONTINGENCY
2	37O00	3770740	7000			INC	\$ 35,000	INC OPERATING TRANSFERS OUT
3		3710100	2020	37100000-37BUDGET		INC	\$ 35,000	INC OPERATING TRANSFERS IN
4		3710100	0220	37100000-37BUDGET		DEC	\$ 35,000	DEC PERMIT REV
5								
6								
7								
8								
9								
10								
11								
12								

TR PA

**AUDITOR-CONTROLLER
 JUN 11 24 AM 11:15**

[Signature]
 JOE HARN, C.P.A. AUDITOR / CONTROLLER DATE **6/6/2024**

[Signature]
 CHIEF ADMINISTRATIVE OFFICE - ANALYST DATE **6/6/24**

[Signature]
 CHIEF ADMINISTRATIVE OFFICER DATE **6/6/24**

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

[Signature] **6-25-24**
 SIGNATURE: CHAIR, BOARD OF SUPERVISORS DATE

[Signature] **6-25-24**
 ATTEST: CLERK, BOARD OF SUPERVISORS DATE