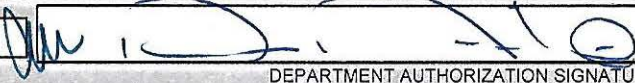


AUDITOR / CONTROLLER'S USE		EL DORADO COUNTY APPROPRIATION TRANSFER ( 29125 GOV. CODE )				
TRANSFER #		<b>BUDGET TRANSFER REQUEST</b>		DOCUMENT TOTAL	\$220,000.00	
JOURNAL #		BUDGET TRANSFER #1 - INCREASING TOTAL APPROPRIATIONS, REVENUES, OR FIXED ASSETS REQUIRES BOS APPROVAL		NUMBER OF LINES	4	
DATE				NET TOTAL	\$0.00	
INPUT BY		BUDGET TRANSFER #2 - MOVING APPROPRIATIONS or REVENUE BETWEEN CLASSIFICATIONS REQUIRES CAO APPROVAL				
TO BE COMPLETED BY DEPARTMENT		Budget Transfer Type:	Transfer 1: BoS Approval			
DEPT NAME	Probation	Legistar Number & Date:	23-0290 03/07/22			
DEPT CONTACT & EXT.	Deborah Dill X6082			1/26/2023	PAGE 1 OF 1	
DEPARTMENT AUTHORIZATION SIGNATURE AND DATE				DATE		

**DIRECTIONS:**

1. MEMO REQUIRED, IF BOS, INCLUDE A COPY OF THE LEGISTAR MASTER REPORT
2. REMOVE THE GREEN COPY AND SUBMIT COMPLETED REQUEST TO THE CHIEF ADMINISTRATIVE OFFICE
3. 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	25V70	2570730	7700			DEC	\$ 55,000	FY 2223 DEC CONTINGENCY
2	25O70	2570730	7000			INC	\$ 55,000	FY 2223 INC JTC KEY & CAM PRJ
3		2520250	2020	25PBJTC -25JVRENTY-STATE		INC	\$ 55,000	FY 2223 INC OP TRNSFR
4	25600	2520250	6042	25PBJTC -25GENERAL -25GENSUPRV-25INTFNDCH		INC	\$ 55,000	FY 2223 INC JTC KEY & CAM PRJ
5								
6								
7								
8								
9								
10								
11								
12								

<p>_____ JOE HARN, C.P.A. AUDITOR / CONTROLLER      DATE</p> <p>_____ CHIEF ADMINISTRATIVE OFFICE - ANALYST      DATE</p> <p>_____ CHIEF ADMINISTRATIVE OFFICER      DATE</p>	<p style="text-align: center;">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</p> <p>_____ SIGNATURE: CHAIR, BOARD OF SUPERVISORS      DATE</p> <p>_____ ATTEST: CLERK, BOARD OF SUPERVISORS      DATE</p>
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**MEMO SHEET: BUDGET TRANSFER INFORMATION**


Department Name*	Probation	Budget Transfer Type:	Transfer 1: BoS Approval
Clerk*	Deborah Dill	Document total*	\$ 220,000
Contact phone*	6082		

**BUDGET TRANSFER HEADER**

Prepared date*	01/26/23	Check Applicable* <input checked="" type="checkbox"/> One Time (after Adopted Budget) <input type="checkbox"/> Continuing (include in the Adopted Budget)
Fiscal year	2223	
Short Description* <small>(10 characters)</small>	JTC	
		Legislar Item Number* 23-0290 03/07/22
* REQUIRED FIELDS		Project Strings Required*

By signing this memo I hereby certify that:  
1. information herein is true and accurate to the best of my knowledge, 2. I have been delegated signature authority in accordance with County's policies and procedures and 3. all transfers approved on this journal are in compliance with County policies and procedures and any other relevant governmental regulations.

Authorized signature\* 



**BUDGET TRANSFER JUSTIFICATION AND DESCRIPTION\*** (will be scanned into FENIX TCM)

PROBATION HAS A FAILING KEY MANAGEMENT SYSTEM AND FAILING SECURITY CAMERAS AT THE JUVENILE TREATMENT CENTER IN SOUTH LAKE TAHOE. THE DEPARTMENT HAS PUT OFF REPLACING THESE TWO PROJECTS IN THE ANTICIPATION OF A NEW FACILITY IN PLACERVILLE. WITH THAT NO LONGER A POSSIBILITY, THE DEPARTMENT IS MOVING FORWARD TO HAVE THESE TWO PROJECTS COMPLETED THIS FISCAL YEAR, AS IT IS A SECURITY AND SAFETY ISSUE FOR STAFF.

THE DEPARTMENT IS USING JUVENILE JUSTICE FUNDING THAT WAS RECEIVED FOR COUNTY OPERATED JUVENILE FACILITIES THAT WAS DEPOSITED INTO THE JUVENILE RE-ENTRY SRF.

**FOR AUDITOR'S OFFICE USE ONLY**

Audit date:	_____	Budget Transfer number:	_____
Audited by:	_____	Interfaced by:	_____
		Processed on:	_____