

AUDITOR / CONTROLLER'S USE
 TRANSFER #
 DATE
 CODE BY

BUDGET TRANSFER REQUEST #1

DOCUMENT TOTAL	122,000.00
NUMBER OF LINES	4
TRANSACTION CODE TOTAL*	

Community Development Services
 DEPARTMENT OR AGENCY NAME
 LEGISTAR # 18-0801

5/9/2018
 DATE

BM

[Signature]
 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	D	3630350	6040	TBD	11,000.00	FY 17-18 EQUIPMENT TRAILER INC FIXED ASSETS
2	C	3630350	4606	TBD	11,000.00	FY 17-18 EQUIPMENT TRAILER DEC FUEL PURCHASES
3	D	3600010	4500	TBD	50,000.00	FY 17-18 STREET SWEEPER INC SPEC DEPT EXPENSE
4	C	3600010	1768	TBD	50,000.00	FY 17-18 STREET SWEEPER INC TRPA REVENUE
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14						Prepared by: Brandi Reid

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 _____