

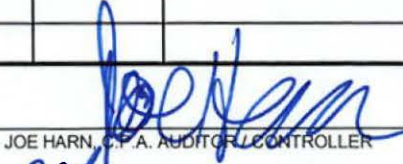
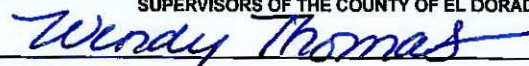
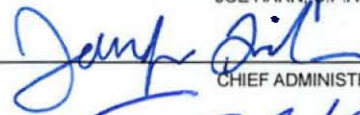

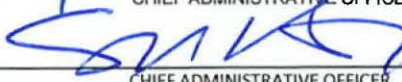


|                               |                              |   |  |  |  |   |   |
|-------------------------------|------------------------------|---|--|--|--|---|---|
| AUDITOR / CONTROLLER'S USE    |                              | EL DORADO COUNTY APPROPRIATION TRANSFER ( 29125 GOV. CODE )   |  | DOCUMENT TOTAL   |  | \$3,320,000.00  |   |
| TRANSFER #                    | TR 2024030                   | <b>BUDGET TRANSFER REQUEST</b>  |  |  |  | NUMBER OF LINES   | 4 |
| JOURNAL #                     | 2024-06-531                  |   |  |  |  | BUDGET TRANSFER #1 - INCREASING TOTAL APPROPRIATIONS, REVENUES, OR FIXED ASSETS REQUIRES BOS APPROVAL |   |
| DATE                          | 12-6-23                      | BUDGET TRANSFER #2 - MOVING APPROPRIATIONS or REVENUE BETWEEN CLASSIFICATIONS REQUIRES CAO APPROVAL   |  | Using funds out of contingency to buy a new snowblower for SLT. Confirmed available funds. MA 11/22/23 |  |   |   |
| INPUT BY                      | TMS                          | Budget Transfer Type:   |  | Transfer 1: BoS Approval   |  |   |   |
| TO BE COMPLETED BY DEPARTMENT |                              | Legistar Number & Date:   |  | 23-1995 12/05/23   |  |   |   |
| DEPT NAME                     | DEPARTMENT OF TRANSPORTATION | <br><small>Rafael Martinez Oct 31, 2023 08:57 PDT</small> |  | 10/26/2023   |  | PAGE 1 OF 1   |   |
| DEPT CONTACT & EXT.           | Stephanie Lisius X 5851      | <br><small>Stephanie Lisius</small>                        |  | 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<br>F<br>X | Budget<br>Rollup<br>Code | ORG     | OBJECT | PROJECT STRING                    | GL Project | INCREASE OR<br>DECREASE<br>(INC / DEC) | AMOUNT     | DESCRIPTION (30 CHARACTERS<br>MAX.) |
|-------------|--------------------------|---------|--------|-----------------------------------|------------|--|------------|-------------------------------------|
| 1           |                          | 3670735 | 7700   |                                   |            | DEC                                    | \$ 830,000 | DEC CONTINGENCY MEASURE S           |
| 2           |                          | 3670735 | 7000   |                                   |            | INC                                    | \$ 830,000 | INC OPERATING XFER OUT              |
| 3           |                          | 3630350 | 2020   | 3630SHOP-36BUDGET-36REV-36GENERAL |            | INC                                    | \$ 830,000 | INC OPERATING XFER IN               |
| 4           |                          | 3630350 | 6040   | 3630SHOP-36BUDGET-36EXP-36RRNO    |            | INC                                    | \$ 830,000 | INC FIXED ASSET BLOWER              |
| 5           |                          |         |        |                                   |            |  |            |                                     |
| 6           |                          |         |        |                                   |            |  |            |                                     |
| 7           |                          |         |        |                                   |            |  |            |                                     |
| 8           |                          |         |        |                                   |            |  |            |                                     |
| 9           |                          |         |        |                                   |            |  |            |                                     |
| 10          |                          |         |        |                                   |            |  |            |                                     |
| 11          |                          |         |        |                                   |            |  |            |                                     |
| 12          |                          |         |        |                                   |            |  |            |                                     |

|   |   |
|---|---|
| <br>JOE HARN, C.P.A. AUDITOR / CONTROLLER<br>DATE 11/20/23 | <br>WENDY THOMAS<br>SIGNATURE: CHAIR, BOARD OF SUPERVISORS<br>DATE 12/6/2023 |
| <br>CHIEF ADMINISTRATIVE OFFICE - ANALYST<br>DATE 12/7/23  | <br>CLERK, BOARD OF SUPERVISORS<br>DATE 12/6/2023                            |
| <br>CHIEF ADMINISTRATIVE OFFICER<br>DATE                   | ATTEST: CLERK, BOARD OF SUPERVISORS<br>DATE   |