| | AUDITOR / C | ONTROLLER'S USE | EL DORADO COUNTY APPROPRIATION TRANSFER (29125 GOV. CODE) | | | | | |
|--|--|---|--|--------------------------|-----------------|--------------|--|--|
| TRANSFER # | | | BUDGET TI | RANSFER REQUEST | DOCUMENT TOTAL | \$165,932.00 | | |
| JOURNAL # | | | 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 | | NUMBER OF LINES | 2 | | |
| DATE | | | | | NET TOTAL | \$0.00 | | |
| INPUT BY | | | | | | | | |
| | | | | | | | | |
| то | BE COMPLE | TED BY DEPARTMENT | Budget Transfer Type: | Transfer 1: BoS Approval | | | | |
| DEPT NAME | DEPT NAME Health and Human Services, Public Health | | Legistar Number & Date: | 22-0708 5/10/2022 | | | | |
| DEPT CONTACT & EXT. Kimmi McAdams x6932 | | Apr 12, 2022 DEPARTMENT AUTHORIZATION SIGNATURE AND DATE | | 3/15/2022 DATE | PAGE 1 OF 1 | | | |
| DIRECTIONS: 1. MEMO REQUIRED, IF BOS, INCLUDE A COPY OF THE LEGISTAR MASTER REPORT 2. DEMONS THE CREEN CORY AND SUBMIT COMMILETED REQUIRED TO THE CHIEF ADMINISTRATIVE OFFICE | | | | | | | | |

- 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 | 56400 | 5610100 | 4544 | BUDGET-SUMMARY | | INC | \$ 82,966 | PG TCM AUDIT INC PY REV REF |
| 2 | | 1560600 | 0003 | | | INC | \$ 82,966 | GF INC FB DESIGNATION 335 |
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| JOE HARN, C.P.A. AUDITOR / CONTROLLER DATE | | | | | 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 | | | |
| CHIEF ADMINISTRATIVE OFFICE - ANALYST DATE | | | | | SIGNATURE: CHAIR, BOARD OF SUPERVISORS DATE | | | |
| CHIEF ADMINISTRATIVE OFFICER DATE | | | | ATTEST: CLERK, BOARD OF SUPERVISORS DATE | | | | |

S:\APFORMS\BUDGET TRANSFER 2.XLS

| MEMO SHEET: BUDGET TRANSFER INFORMATION | | | | | | | | |
|---|---|--|---|--|----------------------------|--|--|--|
| | | Budget Transfer Type: | Transfer 1: BoS | Approval | | | | |
| Department Name* | Health and Human Services, | Buuget Hallster Type. | Transfer 1. bos | Арріочаі | | | | |
| Clerk* | Maki Ganno | Document total* | \$ | 165,932 | | | | |
| Contact phone* | 530-642-4893 | | | | | | | |
| BUDGET TRANSFER HEA | DER | | | | | | | |
| Prepared date* | 03/15/22 | Check Applicable* | One Time (after Adopted Budget) | | | | | |
| Fiscal year | 21/22 | | Continuing (include in the Adopted Bud | get) | | | | |
| Short Description* (10 characters) | PYAUD REF | | | | | | | |
| | | Legistrar Item Number* | 22-0708 5/10/2022 | | | | | |
| * REQUIRED FIELDS | | Project Strings Required | Yes | | | | | |
| 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* | | | | | | | | |
| Don Sapon Apr 12, 2022 14:05 Pl | DT) | | | | | | | |
| | BUDGET TRANSFER J | USTIFICATION AND DES | CRIPTION* (will be scanned into | o FENIX TCM) | | | | |
| Audit payback. Public 6 FY 21/22 (December 20 | Guardian discontinued the TO21). We are requesting to | CM program and FY 17/18 use the Audit Reserve esta | e appropriations for the FY 17/ is the last year of participation blished in November 2016. The lready been processed. No fur | . We received the final aud e audit payback amount wa | it report in s \$82,966 | | | |
| FOR AUDITOR'S OFFICE USE ONLY | | | | | | | | |
| Audit date: | | | Budget Transfer number: | | | | | |
| Audited by: | | | Interfaced by: Processed on: | | | | | |

FY 21-22 BOS BTR PG TCM Audit Payback

Final Audit Report 2022-04-12

Created: 2022-04-12

By: Kristen Monroe (kristen.monroe@edcgov.us)

Status: Signed

Transaction ID: CBJCHBCAABAAUcZ6hFOOswtATZrjb6ldnb3lh6gzSuft

"FY 21-22 BOS BTR PG TCM Audit Payback" History

Document created by Kristen Monroe (kristen.monroe@edcgov.us) 2022-04-12 - 9:03:19 PM GMT- IP address: 207.104.47.251

Document emailed to Don Semon (don.semon@edcgov.us) for signature 2022-04-12 - 9:04:17 PM GMT

Email viewed by Don Semon (don.semon@edcgov.us)

Document e-signed by Don Semon (don.semon@edcgov.us)

Signature Date: 2022-04-12 - 9:05:54 PM GMT - Time Source: server- IP address: 76.203.21.49

Agreement completed. 2022-04-12 - 9:05:54 PM GMT