AUDITOR / CONTROLLER'S USE				EL DORADO COUNTY APPROPRIATION TRANSFER (29130 GOV. CODE)  BUDGET TRANSFER REQUEST #1			TO BE COMPLETED BY THE DEPARTMENT		
TRANSFER #							DOCUMENT TOTAL	1,738,564	
DATE			Human Resources/Risk Mgmt Division			NUMBER OF LINES	2		
CODE BY			DEPARTMENT OR AGENCY NAME			TRANSACTION CODE TOTAL*	013		
	12/:	30/2010						PAGE 10F	
DATE				DEPARTMENT AUTHORIZATION SIGNATURE AND PHONE NUMBER			7,702		
	А	* 002 =	REMOVE THE	GOLD COPY AND S AST TWO LINES, NO ATED REVENUE	UBMIT COMPLETE REQUI	ICATION NARRATIVE OR ATTACH A MEM EST TO THE AUDITOR / CONTROLLER'S ( LINES AND USE AN "ODD AND EVEN" NU * 011 = INCREASE IN APPROPRIATION / * 012 = DECREASE IN APPROPRIATION /	OFFICE. IMBERED TRANSACTION CO BOS APPROVED	DDE*	
S F X	TRANS CODE NO.*	INDEX CODE NUMBER	SUB OBJECT NUMBER	USER CODE NUMBER	AMOUNT	DESCRIPTION	(50 CHAR	ACTERS MAX.)	
1	002	083524	001		869,282.00	FY10/11 Bud Rev Recogniz	d Rev Recognize Use of Ret Health Fund		
2	011	083524	4536		869,282.00	FY10/11 Bud Rev Inc in Retirement Benefit			
3									
4									
5									
6									
7									
8							A		
9									
10								VVIII (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	
11									
12									
13							***************************************		
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	

DATE ATTEST: CLERK, BOARD OF SUPERVISORS

CHIEF ADMINISTRATIVE OFFICE