|                                 | AUDITOR / CO       | ONTROLLER'S USE       | EL DORADO COUNTY AP  |  |  |             |
|---------------------------------|--------------------|-----------------------|--|--|--|-------------|
| TRANSFER #                      |                    | TR 2024022            | BUDGET TE  | DOCUMENT TOTAL   | \$3,800,000.00   |             |
| JOURNAL #                       | RNAL# 2024-05-1438 |                       | BUDGET TRANSFER #1 - INCREASING  | NUMBER OF LINES  | 2  |             |
| DATE                            |                    | 11-20-23              | FIXED ASSETS REQ   | NET TOTAL  | \$0.00   |             |
| INPUT BY                        |                    |                       | BUDGET TRANSFER #2 - MOVING APPROPRIATIONS OF REVENUE BETWEEN CLASSIFICATIONS REQUIRES CAO APPROVAL                                    |  | USING DESIGNATION TO REMOVATE 3066 LAKE TAMOE BLUD, VERIA PUNOS NANLABUE. MAD 11/14/23 |             |
| то                              | BE COMPLE          | TED BY DEPARTMENT     | Budget Transfer Type:  | PUNOS MANLABLE MAR ILIUZ   |  |             |
| DEPT NAME                       | CHIEF              | ADMINISTRATIVE OFFICE | Legistar Number & Date:  |  |  |             |
| DEPT CONTACT & EXT. JEREMY APOL |                    | JEREMY APODACA        | Sue Hennike  Tiffany A Schmid  Tiffany A Schmid  Tiffany A Schmid (Nov 3, 2023 12:17 PDT)  DEPARTMENT AUTHORIZATION SIGNATURE AND DATE |  | 11/3/2023<br>DATE  | PAGE 1 OF 1 |
|                                 | JA                 | 2. REMOVE             | EQUIRED, IF BOS, INCLUDE A COPY OF THE L<br>THE GREEN COPY AND SUBMIT COMPLETED<br>ET TRANSFER EXCEEDS 12 LINES, EMAIL EXC             | EGISTAR MASTER REPORT<br>D REQUEST TO THE CHIEF ADMINISTRATIVE O<br>CEL WORKBOOK TO APINTERFACES AND CAC | FFICE<br>D 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                                 |   | 1560600 | 0003   |                |            | INC ,  | \$ 1,900,000 | INC USE OF DESIG F            | OR CAP PROJ             |
| 2                                 | 15500   | 1520200 | 5240   | 15OA -15SP     |            | INC  | \$ 1,900,000 | INC CONTRIB CALTAHOE FACILITY |                         |
| 3                                 |   |         |        |                |            |  |              |                               |                         |
| 4                                 |   |         |        |                |            |  |              |                               |                         |
| 5                                 |   |         |        |                |            |  |              |                               |                         |
| 6                                 |   | iv      |        |                |            |  |              |                               |                         |
| 7                                 |   |         |        |                |            |  |              |                               |                         |
| 8                                 |   |         |        |                |            |  |              |                               |                         |
| 9                                 |   |         |        |                |            |  |              |                               | 18:53 W 10:45           |
| 10                                |   |         |        |                |            |  |              |                               | AH LINSUNUS-80          |
| 11                                |   | Λ       | .1     |                |            |  |              |                               |                         |
| 12                                |   |         |        | 0              |            |  |              |                               |                         |
| 7                                 | JOE HARN C.P. A AUDITOR / CONTROLLER DATE  CHIEF ADMINISTRATIVE OFFICE - ANALYST 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  **TOTAL ** |              |                               |                         |
| CHIEF ADMINISTRATIVE OFFICER DATE |   |         |        |                |            | ATTEST: CLERK ROARD OF SUPERVISORS DATE  |              |                               |                         |
| CHIEF ADMINISTRATIVE OFFICER DATE |   |         |        |                |            | ATTEST: CLERK, BOARD OF SUPERVISORS DATE   |              |                               |                         |