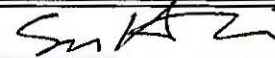

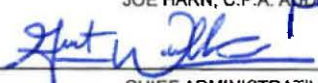
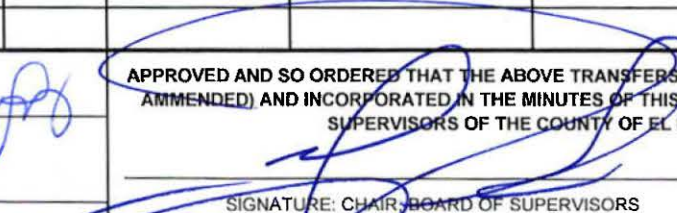
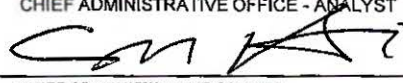



AUDITOR / CONTROLLER'S USE		EL DORADO COUNTY APPROPRIATION TRANSFER ( 29125 GOV. CODE )		DOCUMENT TOTAL		\$20,000.00	
TRANSFER #	TR2025050	<b>BUDGET TRANSFER REQUEST</b>				NUMBER OF LINES	2
JOURNAL #	2025-07-2278	BUDGET TRANSFER #1 - INCREASING TOTAL APPROPRIATIONS, REVENUES, OR FIXED ASSETS REQUIRES BOS APPROVAL				NET TOTAL	\$0.00
DATE	01-28-25	BUDGET TRANSFER #2 - MOVING APPROPRIATIONS or REVENUE BETWEEN CLASSIFICATIONS REQUIRES CAO APPROVAL				MOVING FUND TO Local EXPENSES FOR HEALTH AND WELLNESS PROGRAM EXPENSES. CONFIRMED AVAILABLE FUND. MAR 1/21/25	
INPUT BY	AO	Budget Transfer Type:		Transfer 1: BoS Approval			
TO BE COMPLETED BY DEPARTMENT		Legistar Number & Date:		25-0182 1/28/25		12/23/2024	
DEPT NAME	CAO & HR	DEPARTMENT AUTHORIZATION SIGNATURE AND DATE				PAGE 1 OF 1	
DEPT CONTACT & EXT.	Alison Winter x6765					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 F X	Budget Rollup Code	ORG	OBJECT	PROJECT STRING	GL Project	INCREASE OR DECREASE (INC / DEC)	AMOUNT	DESCRIPTION (30 CHARACTERS MAX.)
1	08400	0800000	4300			INC	10,000	INC PROF SVCS WLNSS REPLENISH
2	15400	1540400	4501			DEC	10,000	DEC SPCL PROJ WLNSS REPLENISH
3								
4								
5								
6								
7								
8								
9								
10								
11								
12								

 JOE HARN, C.P.A. AUDITOR / CONTROLLER DATE: 1/15/2025	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: 1/14/25	 SIGNATURE: CHAIR, BOARD OF SUPERVISORS DATE: 1/29/25
 CHIEF ADMINISTRATIVE OFFICER DATE: 1/14/25	 ATTEST: CLERK, BOARD OF SUPERVISORS DATE: 1/29/25