| Novil | | M, COMMULLING COL | | DUIVE | O OOONII AFFRORM | VIIOIA ILWIADLEL (SAIS | U GOV. CODE J | 10 BE COMPLETED BY THE DEPARTMENT 2 | | |
|---|--|----------------------|----------------------|-----------------------------|---|-------------------------------------|-----------------|-------------------------------------|----------------------|--|
| TRANSFER# | | 2015128. | | BUDGET TRANSFER REQUEST # 1 | | | DOCUMENT TOTAL | 217,030 | | |
| DATE | | | | | CAO | | | NUMBER OF LINES | 2 | |
| CODE BY | | | | DEPARTMENT OR AGENCY NAME | | | | TRANSACTION CODE TOTAL* | 13 | |
| 7-29-15 DATE | | | | Lama S DEPARTMENT AUTH | MWWAH IORIZATION SIGNATURE AND PH | ONE NUMBER | to pross | PAGE / OF / | | |
| COMPLETE THE INFORMATION BELOW, WITH JUSTIFICATION NARRATIVE OR ATTACH A MEMO. REMOVE THE GOLD COPY AND SUBMIT COMPLETED REQUEST TO THE AUDITOR / CONTROLLER'S OFFICE. A BUDGET TRANSFER REQUEST MUST BE AT LEAST TWO LINES, NOT EXCEED TWENTY SIX LINES, AND USE AN "ODD AND EVEN" NUMBERED TRANSACTION CODE * * 002 = INCREASE ESTIMATED REVENUE * 011 = INCREASE IN APPROPRIATION / BOS APPROVED * 003 = DECREASE ESTIMATED REVENUE * 012 = DECREASE IN APPROPRIATION / BOS APPROVED | | | | | | | | | | |
| % II.8 | TRANS CODE NO. | index gode Numeër | SUB-OBUROT NUMBER | UBER GODE NUMBER | AMOUNT | | DESCRIPTION | (80 GHARA) | Ters Max) | |
| 1 | 002 | 7702317 | 1200 | | 108,515 | | inc rev s | SMUD FERC GI | | |
| 2 | 019 | 2702317 | 5240 | | 108,515 | 11 | | | 14 // | |
| 3 | 01.1 | 2:5 | | | / | | | | | |
| 9 | N N | ā. | | | | | | | | |
| 5 6 | COF | 6 | | | | | | | | |
| 7 | ORF | 3 | | | 2 | | | | | |
| 8 |)TIC | | | | | | , | | | |
| 9 | 4.0 | | | | | | | | | |
| 10 | | | | | 1 | | Legist | ar # 15-0942 | 3 | |
| 11 | | | | | | 0 | 8/11/15 Agenda | 1/15 Agenda | | |
| 12 | | | | | | | | | | |
| 13 | | A | | | | APPROVED AND SO | ORDERED THAT T | HE AROVE TRANSFERS RE W | ADE (AS REQUESTED OR | |
| FOR FORMAT BY | FOR RMAT BY SILVEN SILV | | | | 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 | | | | | |
| JOE HARN, C.P.A. AUDITORY CONTROLLER DATE AUGUST 1-19-15 CHIEF ADMINISTRATIVE OFFICE - ANALYST DATE | | | | | | SIGNA | ATURE: CHAIRMAN | N, BOARD OF SUPERVISORS | 8/11/15 DATE | |
| CHIEF ADMINISTRATIVE OFFICE DATE | | | | | | ATTEST: CLERK, BOARD OF SUPERVISORS | | | | |
| DISTRIBUTION: WHITE - BOS / YELLOW - AUDITOR / PINK - CHIEF ADMINISTRATIVE OFFICE / GOLD - DEPARTMENT | | | | | | | | | | |