

AUDITOR / CONTROLLER'S USE	
TRANSFER #	
DATE	
CODE BY	

EL DORADO COUNTY APPROPRIATION TRANSFER (29130 GOV. CODE)

BUDGET TRANSFER REQUEST #1

MAK
 District Attorney FY 17/18
 DEPARTMENT OR AGENCY NAME

TO BE COMPLETED BY THE DEPARTMENT	
DOCUMENT TOTAL	8,000.00
NUMBER OF LINES	4
TRANSACTION CODE TOTAL*	26

9/14/2017
 DATE

Kurt
 DEPARTMENT AUTHORIZATION SIGNATURE AND PHONE NUMBER

COMPLETE THE INFORMATION BELOW WITH JUSTIFICATION NARRATIVE OR ATTACH A MEMO.
 REMOVE THE GOLD COPY AND SUBMIT COMPLETE REQUEST TO THE AUDITOR / CONTROLLER'S OFFICE.
 A BUDGET TRANSFER 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

S F X	TRANS CODE NO.*	INDEX CODE NUMBER	SUB OBJECT NUMBER	USER CODE NUMBER	AMOUNT	DESCRIPTION (50 CHARACTERS MAX.)
1	002	7722364	0001	DAASF	2,000.00	FY 17/18 INC FUND BAL ASF DRUG STORE PROJ 13-0254
2	011	7722364	7000	DAASF	2,000.00	FY 17/18 INC OP TRF ASF DRUG STORE PROJ 13-0254
3	002	220210	2020	DAASF	2,000.00	FY 17/18 INC OP TRF ASF DRUG STORE PROJ 13-0254
4	011	220210	4501	DAASF	2,000.00	FY 17/18 INC SPEC PROJ ASF DRUG STORE PROJ 13-0254
5						
6						
7						
8						
9						
10						
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

 CHIEF ADMINISTRATIVE OFFICE DATE

 ATTEST: CLERK, BOARD OF SUPERVISORS