	AUDIT	TOR / CONTROLLER'S USE		EL DORADO COUNTY APPROPRIATION TRANSFER (29130 GOV. CODE)			TO BE COMPLETED BY THE DEPARTMENT		
TRANSFER #				BUD	GET TRANSI	FER REQUEST #1	DOCUMENT TOTAL		
DATE				Hun		uman Resources/Risk Mmgt Division			
CODE BY						R AGENCY NAME	TRANSACTION CODE TOTAL*		
							CODE TOTAL		
3/20/2009) -	DEPARTMENT AUTHORIZATION SIGNATURE AND PHONE NUMBER				PAGE 1 OF	
		DATE	COMPLE	TE THE INFORMA		CATION NARRATIVE OR ATTACH A MEMO	 O.		
	A	A BUDGET TRANSF				EST TO THE AUDITOR / CONTROLLER'S O LINES AND USE AN "ODD AND EVEN" NU	_	ODE*	
* 002 = INCREASE ESTIMA * 003 = DECREASE ESTIMA				TED REVENUE * 011 = INCREASE 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	083410	0001		1,149,000	Recognize Use of Fund Balance			
2	011	083410	4104		1,149,000	Increase in Worker's Comp Insurance Claims			
3									
4									
5									
6									
7									
8									
9							_		
10									
11									
12									
13									
	L EWED OR					APPROVED AND SO ORDERED THAT	THE ABOVE TRANSFERS	BE MADE (AS REQUESTED	
FORMAT BY						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. AUDITOR / CONTROLLER DATE							
		CHIEF ADMINISTRATIVE OFFICE - ANALYST DATE				SIGNATURE: CHAIRMAN, BOARD	OF SUPERVISORS	DATE	
		CHIEF ADMINISTRATIVE OFFICE DATE				ATTEST: CLERK, BOARD OF SUPE	ERVISORS		