AUDITOR / CONTROLLER'S USE	
TRANSFER #	
DATE	
CODE BY	

EL DORADO COUNTY APPROPRIATION TRANSFER (29130 GOV. CODE)

BUDGET TRANSFER REQUEST #1

Chief Administrative Office

DEPARTMENT OR AGENCY NAME

TO BE COMPLETED BY THE DEPARTMENT	
DOCUMENT TOTAL	$ 156,212
NUMBER OF LINES	2
TRANSACTION CODE TOTAL*	13

6/15/2018

DATE

DEPARTMENT AUTHORIZATION SIGNATURE AND PHONE NUMBER

PAGE ___ OF _____

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**
*** 003 = DECREASE ESTIMATED REVENUE**
*** 011 = INCREASE IN APPROPRIATION / BOS APPROVED**
*** 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	0670713	0001		$ 78,106	FY 17/18 Inc Fund Balance - State Audit Return of Collection Monies
2	011	0670713	5240		$ 78,106	FY 17/18 Inc Contributions - State Audit Return of Collection Monies
3						
4						
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