		TOD / CONTROL :	DIO LIOF						1
TRAN	SFER#	TRZOZOSZ		BUDGET TRANSFER (29130 GOV. CODE)				TO BE COMPLETED BY	and the same of th
DATE		Inaco	030					NUMBER OF LINES	330,000
CODE BY		,		DEPARTMENT OR AGENCY NAME			- TRANSACTION	000	
					LEGISTAR # 19-1429			CODE TOTAL*	
	10)/3/2019 DATE			Man	DEPARTMENT AUTHORIZATION	SIGNATURE AND PHONE NUMBER		PAGE 1 OF 1
	3			COMPLETE THE INFOR	RMATION BELOW WITH JUSTI AND SUBMIT COMPLETE REQ	FICATION NARRATIVE OR A	TTACH A MEMO.	(one	-time)
		• 002 -	A BUDGET TE	ANSFER MUST BE AT LEAST TWO LIN	ES, NOT EXCEED TWENTY-SI	X LINES AND USE AN "ODD	AND EVEN" NUMBERED TRANSACTION C * 011 = INCREASE IN APPROPRIATION /		
			DECREASE ESTIMA			*012 = DECREASE IN APPROPRIATION / BOS APPROVED (Z) CANNABIS			
S F X	D/C	FENIX Org	SUB OBJECT NUMBER	PL String		AMOUNT	DESCRIPTION	(50 CHARA	ACTERS MAX.)
1	D	3750500	4300	37505003-35CANN	ABIS-37WS		FY 19-20 CODE CANNABIS CONT		
2	С	1560600	TBA	N/A		(165,000.00)	FY 19-20 CODE CONTRACT INC	CANNABIS TAX REVEN	UE - Non-dept.
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22				1 -0/-1 11		.1	X		
REVIE FO FORM	WED R AT BY			NO FILL	7	· W	APPROVED AND SO ORDERED THAT OR AMENDED) AND INCORPORATED I SUPERVISORS (THE ABOVE TRANSFERS BE IN THE MINUTES OF THIS ME OF THE COUNTY OF EL DORA	ETING OF THE BOARD OF
		JOE HARN, C.P.A AUDITOR / CONTROLLER				OR AMENDED) AND INCORPORATED IN THE MINUTES OF THIS MEETING OF THE BOARD OF SUPERVISORS OF THE COUNTY OF EL DORADO			
	W	CHIEF ADMINISTRATIVE OFFICE - ANALYST				DATE SIGNATURE: CHAIRMAN, BOARD OF SUPERVISORS DATE			
		CHIEF ADMINIST	TRATIVE OFFICE	DISTRIBUTION, WILLIAM SO	OR (VELLOW, AUDITOR / DIVI	DATE CHIEF ADMINISTRATIVE	ATTEST: CLERK, BOARD OF SUPE		8: 0 0

S:\APFORMS\BUDGET TRANSFER 1.XLS

TRIBUTION: WHITE - BOS / YELLOW - AUDITOR / PINK - CHIEF ADMINISTRATIVE OFFICE / GOLD - DEPARTME