AUDITOR / CONTROLLER'S USE			EL DORADO COUNTY APPROPRIATION TRANSFER (29125 GOV. CODE)			
TRANSFER#			BUDGET TR	DOCUMENT TOTAL	\$1,438,000.00	
JOURNAL#			BUDGET TRANSFER #1 - INCREASING TOTAL APPROPRIATIONS, REVENUES, OR FIXED ASSETS REQUIRES BOS APPROVAL BUDGET TRANSFER #2 - MOVING APPROPRIATIONS OF REVENUE BETWEEN CLASSIFICATIONS REQUIRES CAO APPROVAL Budget Transfer Type: Transfer 1: BoS Approval		NUMBER OF LINES	2
DATE		NET TOTAL			\$0.00	
INPUT BY						
TO BE COMPLETED BY DEPARTMENT						
DEPT NAME	HHSA, (Community Services, ESG-CV	Legistar Number & Date:			
DEPT CONTACT & EXT. Nita Wracker, ext. 6933		D. Semon Approved electronically 3/5/2021		2/11/2021	PAGE 1 OF 1	
			DEPARTMENT AUT	HORIZATION SIGNATURE AND DATE	DATE	
		2. REMOVE	EQUIRED, IF BOS, INCLUDE A COPY OF THE LE THE GREEN COPY AND SUBMIT COMPLETED ET TRANSFER EXCEEDS 12 LINES, EMAIL EXCE	REQUEST TO THE CHIEF ADMINISTRATIVE OF		

S F X	Budget Rollup Code	ORG	OBJECT	PROJECT STRING	GL Project	INCREASE OR DECREASE (INC / DEC)	AMOUNT	DESCRIPTION (30 CHARACTERS MAX.)		
1		5210115	0880	Budget-Summary		INC	\$ 719,000	FY20/21 Inc Rev State		
2	52523	5210115	5000	Budget-Summary		INC	\$ 719,000	FY20/21 Inc Exp Support Person		
3										
4										
5										
6										
7										
8										
9										
10										
11										
12								/		
JOE HARN, C.P.A. AUDITOR / CONTROLLER DATE				APPROVED AND SO ORDERED THAT THE ABOVE TRANSFERS BE MADE (AS REQUESTED OR AMMENDED) AND INCORPORATED IN THE MINUTES OF THIS MEETING OF THE BOARD OF SUPERVISORS OF THE COUNTY OF EL DORADO						
Emma Owens approved electronically 3/5/2021 CHIEF ADMINISTRATIVE OFFICE - ANALYST DATE				SIGNATURE: CHAIR, BOARD OF SUPERVISORS DATE						
_	CHIEF ADMINISTRATIVE OFFICER DATE				ATTE	EST: CLERK, BOARD OF SUF	PERVISORS DATE			

S:\APFORMS\BUDGET TRANSFER 2.XLS

	MEN	10 SHEET: BUDGET TRA	ANSFER INFORMATION			
Department Name*	HHSA, Community Services, ESG-CV	Budget Transfer Type:	Approval			
Clerk*	Valerie Ladowski	Document total*	\$	1,438,000		
Contact phone*	(530) 642-7174					
BUDGET TRANSFER HEA	DER					
Prepared date*	02/11/21	Check Applicable*	One Time (after Adopted Budget)			
Fiscal year Short Description*	2021		Continuing (include in the Adopted Bud	jet)		
(10 characters)	ESG-CV					
		Legistrar Item Number*	#21-0276 3/16/21			
* REQUIRED FIELDS		Project Strings Required Yes				
By signing this memo I h 1. information herein is policies and procedures governmental regulation	true and accurate to the best and 3. all transfers approve	st of my knowledge, <u>2.</u> I h ed on this journal are in co Authorized sig	ompliance with County policies	authority in accordance with County's and procedures and any other releva	nt	
		Authorized Sig	, included			
approved to receive an to the COVID-19 outbre	Services Agency (HHSA), Cor allocation of funds awarded eak and to protect the health this vulnerable population.	mmunity Services Division I to El Dorado County for s	heltering of the current homele	ent (ESG-CV) program, was recently ess population. This grant is in response nor Newsom signed SB 89 allocating	<u>}</u>	
		FOR AUDITOR'S OF	FICE USE ONLY			
Audit date:			Budget Transfer number:			
Audited by:			Interfaced by:			

Processed on: