



**COUNTY OF CALAVERAS
OFFICE OF AUDITOR-CONTROLLER
BUDGET TRANSFER**

Fiscal Year: FY 2017-18

Requesting Dept. Administration

GL Org Key: 10100120

JL Org Key: _____

Indicate Type:

Appropriation/ Est Revenue Increase
(Requires 4/5 Board of Supervisors Approval)

Contingency Transfer
(Requires 4/5 Board of Supervisors Approval)

Interclass Transfer
(Enter in IFAS Requires Admin and Auditor Approval)

Intraclass Transfer
(Enter in IFAS Requires Auditor Approval)

Revenue:

Object No.	Description of Revenue	Amount
Total Revenue:		-

Expense:

Object No.	Description of Expenditure	Amount
5737	Operating Transfers Out - Public Works	288,595
Total Expense:		288,595.00

10100700/5990 Contingency Draw: 288,595

Total -

Comments:

Submitted: _____

Department Head/ Authorized Signature Date

Verification of Sufficient Funds: _____

Auditor-Controller Date

Approval by CAO: _____

CAO Date

Approval by Board of Supervisors

Attested: _____

Clerk of the Board: _____ Vote: _____ Yes _____ No

Auditor Use Only: Budget Adjustment No: _____ Date: _____
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