



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

<p>Fiscal Year: <u>FY 2017-18</u></p> <p>Requesting Dept. <u>Public Works - Roads and Bridges Division</u></p> <p>GL Org Key: <u>10200760</u></p> <p>JL Org Key: _____</p>	<p>Indicate Type:</p> <p><input checked="" type="checkbox"/> Appropriation/ Est Revenue Increase (Requires 4/5 Board of Supervisors Approval)</p> <p><input type="checkbox"/> Contingency Transfer (Requires 4/5 Board of Supervisors Approval)</p> <p><input type="checkbox"/> Interclass Transfer (Enter in IFAS Requires Admin and Auditor Approval)</p> <p><input type="checkbox"/> Intraclass Transfer (Enter in IFAS Requires Auditor Approval)</p>
--	--

Revenue:		
Object No.	Description of Revenue	Amount
<u>4720</u>	<u>Operating Transfers from General Fund</u>	<u>21,748</u>
<u>4751</u>	<u>County Reimbursement</u>	<u>5,095</u>
Total Revenue:		26,843

Expense:		
Object No.	Description of Expenditure	Amount
<u>5407</u>	<u>Special Department Expense</u>	<u>85,229</u>
Total Expense:		85,229.00

<u>10100700/5990</u>	Contingency Draw:	
	Total	(58,386.00)

Comments:

Submitted:		
	<small>Department Head/ Authorized Signature</small>	<small>Date</small>
Verification of Sufficient Funds:		
	<small>Auditor-Controller</small>	<small>Date</small>
Approval by CAO:		
	<small>CAO</small>	<small>Date</small>

Approval by Board of Supervisors

Attested: Clerk of the Board: _____

Vote: _____ Yes _____ No

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