COUNTY OF HUMBOLDT
REQUEST FOR BUDGET TRANSFER/ADJUSTMENT

**# A** _____

DEPARTMENT: Sheriff's Department DEPARTMENT #: 25 POSTING DATE: 2/1/2023

1.) The reason for this budget transfer request is:

| | | |
|---|---|---|
| | Transfer within expenditure/revenue category (with Auditor Approval) | Original only |
| | Transfer between expenditure/revenue category (with CAO & Auditor Approval) | Original +1 |
| | Increase/decrease Intrafund Transfer account (with Board Approval)* | Original +1 |
| | Transfer to or from Contingencies (with Board Approval)* | Original +1 |
| | Increase/decrease budget unit appropriation (with Board approval)* | Original +1 |
| | Establish/transfer funds in Fixed Assets <$10,000 (CAO & Auditor Approval) | Original +1 |
| X | Establish/transfer funds in Fixed Assets >$10,000 (with Board Approval)* | Original +1 |

2.)

| **Amount:** | **Transfer to Account:** Number: | Name: | **Transfer from Account:** Number: | Name: |
|---|---|---|---|---|
| $ 12,100.00 | 3884-127-8986 | Equipment | 3884-127-2118 | Professional Services |

3.) In the space below, state (a) reason for transfer request, (b) reason why there are sufficient balances in affected accounts, and (c) why transfer cannot be delayed until next budget year.

a.) Establish fixed asset.

b.) Fixed asset item is needed now.

c.) Funds available in professional services due to Edovo computer services no longer needed.

4.) Department Head Approval: Date APPROVED (signed) By Regina Fuller at 12:16 pm, Jan 17, 2023

5.) Balances verified by Auditor-Controller Date APPROVED (signed) By Cheryl Dillingham at 10:33 am, Jan 19, 2023

6.) _____/Approved _____/Not approved _____/Recommended _____/Not recommended

County Administrative Officer: Date _____ (signed) _____

INSTRUCTIONS

SEND ORIGINAL REQUEST FOR BUDGET TRANSFER DIRECTLY TO THE AUDITOR-CONTROLLER.

* Requires copy of Board Order to be attached *Revised 03/19* Posted by _____