

COUNTY OF HUMBOLDT
REQUEST FOR BUDGET TRANSFER/ADJUSTMENT

A _____

DEPARTMENT: Sheriff

DEPARTMENT #: 25 POSTING DATE: _____

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
<u>X</u>	Establish/transfer funds in Fixed Assets >\$10,000 (with Board Approval)*	Original +1

2.)	Amount:	Transfer to Account:		Transfer from Account:	
		Number:	Name:	Number:	Name:
	\$ 22,700.00	1100-221810-8303	Robot-Remote Contro	1100-221810-3307	Contribution Other Gov Agency
	\$ 11,000.00	1100-221810-9360	General Fund Contrib	1100-221-9360	General Fund Contribution
	\$ 11,000.00	1100-221810-8303	Robot-Remote Contro	1100-221-2123	Special Departmental

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.) To establish a fixed asset to purchase a tactical robot for SWAT.

b.) Grant funds have not been spent or encumbered yet.

c.) Grant funds must be spent by 5/31/2020 and the modification was approved on 3/20/2020. Unable to spend as originally requested and received approval from grant administrator to revise the budget so the full funds can be used.

4.) Department Head Approval: _____ Date _____ (signature) **APPROVED**
By Regina Fuller at 1:59 pm, Apr 01, 2020

5.) Balances verified by Auditor-Controller _____ Date _____ (signature) **APPROVED**
By Karen Paz Dominguez at 9:39 pm, Apr 06, 2020

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

County Administrative Officer: _____ Date _____ (signed) _____

INSTRUCTIONS

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