



Budget Adjustment Authorization

Submittal Date *

12/6/2022

For Fiscal Years *

2022-2023

Contact First Name *

Jenny

Contact Last Name *

Nunez-Rodriguez

Department *

WNR

Department/Org #

15010

Department Head Name *

Stephanie Anagnoson

Will this Budget Adjustment be Board Approved? *

☒ Yes

☐ No

Draft Board Letter

Upload

If Board Approved, indicate the target Board date: *

1/10/2023

Please Select *

☒ Transfer of Appropriations ☐ Receipt of Unanticipated Revenue

Please select the document type(s) from the check boxes above. Your selection will remove unneeded fields from the form. Transfer of Appropriations Transfer From.

Transfer of Appropriations

Transfer From

Org # *	Org Description *	Account # *	Account Description *	Amount *
15010	Flood Control	721400	Prof & Spec SVC	7,000

Add

Total

\$ 7,000.00

Transfer To

Org # *	Org Description *	Account # *	Account Description *	Amount *
15010	Flood Control	740301	Eqpt/Furniture>\$5000	7,000

Add

Total

\$ 7,000.00

Explanation of Transfer *

This transfer of funds is needed to finalize the purchase of a carport for the Emergency Action Plan (EAP). The EAP is a grant from the Flood Control Agency. This grant is 100% reimbursable to the County.

Describe the reason for Transfer

Totals In "Transfer From" and "Transfer To" must match

Note: Transfers from Contingencies require a 4/5 vote.

Section

Name *

Stephanie Anagnoson

Title *

Director of Water and Natural Resources

Auditor to Complete

TO AUDITOR-CONTROLLER: This request is deemed necessary by this department. Please report as to the accounting and available balances and forward to the Administrative Officer for his recommendation or action.

Approved as to Availability of Funds: *

☒ Yes ☐ No

Auditor Controller's # *

22-080

Signature

David E. Richstone

Auditor Name *

David Richstone

Date *

12/11/2022

The County Auditor-Controller is authorized to make such budgetary adjustments as will carry out the intent and purpose of this budget adjustment.

Administrative Officer to Complete

Administrative Officer's Report *

County Administration has reviewed this request, and it is recommended for approval.

Please Select *

☒ Recommended ☐ Approve as Requested ☐ Approve as Revised

Signature *

Jessica Leon

Admin Officer Name *

Jessica Leon

Date *

12/12/2022

Attached for Board Approval

*

☐ Completed