COUNTY OF MENDOCINO
REQUEST FOR APPROPRIATION, CANCELLATION OR REVISION OF FUNDS

Dept No. 0713 Department of Risk/EO Date 1/23/17

To County Auditor-Controller:
The following request is deemed necessary. Please report the available balances to County Executive Officer.

TRANSFER FROM: FUND 7130 ORG/BUDGET GL			AUDITOR BALANCE	TRANSFER ~~FROM~~ TO: FUND 1100 ORG/BUDGET RO 3010			AUDITOR BALANCE
93 825810	J+D Rev	$ 22,716	-0-	93 827802	OTI	$ 42,716	-0-
93 863320	J+D	$ 20,000	203,309.23	93 864370	Equip	$ 42,716	274,979.02
93 865802	OTO	$ 42,716	-0-	93		$	
93		$		93		$	
93		$		93		$	

Vehicle replacement for stolen vehicle

JUSTIFICATION: As stated above or attached memo. DEPARTMENT HEAD By [signature]

TO COUNTY EXECUTIVE OFFICER:

☑ Sufficient balances remain in the accounts indicated to effect transfer as requested.

☐ Insufficient balances are available to meet the above request within departmental budget.
Requires transfer of $ _____

REMARKS:

No. 01T007 Date 1-23-17 AUDITOR-CONTROLLER By Lucy Simonson

COUNTY EXECUTIVE OFFICER: ☑ RECOMMENDATION ☐ APPROVAL ☐ DENIED

COMMENTS:

Date 1.24.17 [signature] COUNTY EXECUTIVE OFFICER

ACTION OF BOARD OF SUPERVISORS:

☐ Approved as requested ☐ Approved as revised ☐ Other

REMARKS:

Date _____ By: _____ DEPUTY CLERK, BOARD OF SUPERVISORS

JE NO. _____ Date _____ By: _____