COUNTY OF MENDOCINO

REQUEST FOR APPROPRIATION, CANCELLATION OR REVISION OF FUNDS

Dept./Office: CANNABIS Date 02/23/2026

To County Auditor-Controller:

The Following request is deemed necessary. Please report the available balances to the County Executive Officer.

Fund	Org/BU	Object (+Project)	Object Description	AMOUNT	I/D	AUDITOR BALANCE
1100	CN	826205	CANNABIS APPLICATION/INSPECT	$ 15,623.53	I	($50,115.00)
1100	CN	862187	EDUCATION & TRAINING	$ 600.00	D	$600.00
1100	CN	862229	SOFTWARE-MAINTENANCE	$ 13,915.00	D	$23,977.00
1100	CN	862253	TRAVEL & TRSP OUT OF COUNTY	$ 1,000.00	D	$1,000.00
1100	CN	865802	OPERATING TRANSFER OUT	$ 31,138.53	I	$0.00
4970	WOLJA21	827802	OPERATING TRANSFER IN	$ 31,138.53	I	$0.00
4970	WOLJA21	863113	PAYMENTS TO OTHR GOV AGENCIES	$ 31,138.53	I	$0.00

Following the Department of Cannabis Control (DCC) State audit, certain expenditures charged to the Local Jurisdiction Assistance Grant Program were determined to be unallowable and must be reimbursed to the State. To facilitate this reimbursement, the grant fund is requesting an appropriation of $31,138.53 from the General Fund. It is anticipated that 2000 series expenses for CN will be under budget and revenue will be increasing due to the most recent fee hearing. Reallocating $31,138.53 from the 2000 series and revenue to Operating Transfer Out (OTO) results in no net cost to the County. The transfer of these funds to grant organization WOLJA21 and the corresponding increase in payments to other governmental agencies likewise results in a $0.00 net County cost.

JUSTIFICATION: As stated above or attached memo. DEPARTMENT HEAD By Julia Krog

Prepared by: Sara McBurney Ph: 707-234-6680 Email: mcburneys@mendocinocounty.gov

TO COUNTY EXECUTIVE OFFICER:

[X] 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. 2026 02T001 Date February 23, 2026 AUDITOR-CONTROLLER By Shannon Cubbison

COUNTY EXECUTIVE OFFICER: [ ] RECOMMENDATION [✓] APPROVAL [ ] DENIED

COMMENTS:

Date 2/26/2026 Darcie Antle

COUNTY EXECUTIVE OFFICER

ACTION OF BOARD OF SUPERVISORS: [X] APPROVED AS REQUESTED [ ] APPROVED AS REVISED [ ] OTHER

REMARKS:

Date 03/10/2026 Anaya

DEPUTY CLERK OF THE BOARD OF SUPERVISORS

JE NO._____ Date_____ By:_____