

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

Dept No. 6110 Department of Library Date 8-10-16

To County Auditor-Controller:

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

TRANSFER FROM:			AUDITOR	TRANSFER FROM: <u>TO</u>			AUDITOR
FUND	ORG/BUDGET		BALANCE	FUND	ORG/BUDGET		BALANCE
93	<u>87</u>	<u>7400</u>		93	<u>86</u>	<u>4370</u>	
		<u>\$ 16,000</u>				<u>\$ 16,000</u>	
93		\$		93		\$	
93		\$		93		\$	
93		\$		93		\$	
93		\$		93		\$	

Allocate use of fund balance reserves to go toward the purchase of a generator for the book mobile.

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. _____ Date _____ AUDITOR-CONTROLLER By _____

COUNTY EXECUTIVE OFFICER: RECOMMENDATION APPROVAL DENIED

COMMENTS:

Date _____ 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: _____