

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

Dept./Office: OES

Date 06/02/2022

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	ES/2830	825490	State Other Revenue	\$ 200,000.00	I	\$0.00
1100	ES/2830	862230	Info Tech Equip	\$ 100,000.00	I	\$121,324
1100	ES/2830	862239	Special Department Expense	\$ 50,000.00	I	\$0.00

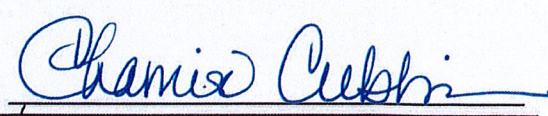
Appropriate funds in OES budget revenue will offset expenses at 100% reimbursement through CalOES 21 CalFire Evacuation Route Planning and Development Grant Program.

JUSTIFICATION: As stated above or attached memo. DEPARTMENT HEAD By 
 Prepared by: Brentt Blaser Ph: (707)463-5667 Email: Blaserb@mendocinosheriff.org

TO COUNTY EXECUTIVE OFFICER:

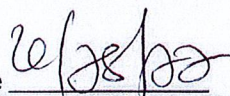
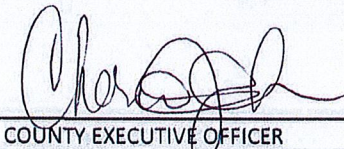
- Sufficient balances remain in the accounts indicated to effect transfer as requested.
 - Insufficient balances are available to meet the above request within departmental budget.
- Requires transfer of \$ _____

REMARKS:

No. 07T003 Date 6/28/2022 AUDITOR-CONTROLLER By 

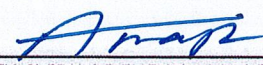
COUNTY EXECUTIVE OFFICER: RECOMMENDATION APPROVAL DENIED

COMMENTS:

Date  COUNTY EXECUTIVE OFFICER 

ACTION OF BOARD OF SUPERVISORS: APPROVED AS REQUESTED APPROVED AS REVISED OTHER

REMARKS:

Date 7/12/2022 
 DEPUTY CLERK OF THE BOARD OF SUPERVISORS

JE NO. _____ Date _____ By: _____