

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

Dept No. 0327 Department of Air Quality Date 7/1/17  
6/30/17

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>701</u>			AUDITOR
FUND	ORG/BUDGET		BALANCE	FUND	ORG/BUDGET		BALANCE
<u>3270</u>	<u>0327</u>			<u>3270</u>	<u>0327</u>		
93		<del>\$55,000</del>		93		<u>\$55,000</u>	<u>40,000</u>
93	<u>75 0000</u>	<u>\$55,000</u>	<u>1,210,420</u>	93		\$	
93		\$		93		\$	
93		\$		93		\$	
93		\$		93		\$	

SEE ATTACHED

JUSTIFICATION: As stated above or attached memo.

DEPARTMENT HEAD By Barbara Howard

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. 07T001 Date 7-1-17 AUDITOR-CONTROLLER By [Signature]

COUNTY EXECUTIVE OFFICER: ☒ RECOMMENDATION ☐ APPROVAL ☐ DENIED

COMMENTS:

Date July 6, 2017 COUNTY EXECUTIVE OFFICER [Signature]

ACTION OF BOARD OF SUPERVISORS:

- ☐ Approved as requested ☐ Approved as revised ☐ Other

REMARKS:

Date \_\_\_\_\_ By: \_\_\_\_\_  
DEPUTY CLERK, BOARD OF SUPERVISORS

JE NO. \_\_\_\_\_ Date \_\_\_\_\_ By: \_\_\_\_\_