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

Dept No. 2851 D	epartment of	E MINNA	2 Buildi	na	Date 4-12-	18
To County Auditor-Controller: The following request is deeme	d necessary. Please r	eport the available l		xecutive Office	er.	
TRANSFER FROM: FUND \(\lambda \colon \colo	2857/PB	AUDITOR BALANCE	TRANSFER-FROM: FUND 1100	ORG/BUDGE	т <u> 2851/Р</u> В	AUDITOR BALANCE
93 PB S(0 0 1) 93 93 93 93 93	\$ \$ \$ \$	790,698	93 PB 8 93 93 93 93 93 TO COVE		\$ 40,000 \$ \$ \$ \$	43,951 for
Transfer is necessary to cover contract for continued Department Interim Director.						
JUSTIFICATION: As stated abov	e or attached memo.		DEPARTMENT HI	EAD By	Mund 1	large
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 \$						
COUNTY EXECUTIVE OFFICER COMMENTS:	RECOMMI	ENDATION [APPROVAL	☐ DENIED	•	
Date 4/12/18			COUNTY EXECUT	TIVE OFFICE	R	
ACTION OF BOARD OF SUPERV Approved as requested REMARKS:	Approved as	revised (E. M.)	□ Other	a Vali	Haae	,
Date 5.2.18	PRARB OF SU	8	DEPUTY CLERK,	BOARD OF SI	UPERVISORS	
JE NO	Date Auditor Copy - White		By:			A Thurst

Requesting Dept - Pink

6/19/2008

Department - Blue

Approp Transf