

**COUNTY OF SAN BENITO
BUDGET ADJUSTMENT/TRANSFER**

Please Indicate Type:

Fiscal Year: FY 2019/20
 Department: Probation (AB109)
 Org Key: 4040

- ☒ **Appropriation/Est. Revenue Increase**
 (Requires 4/5 Board of Supervisors Approval)
☐ **Contingency Transfer**
 (Requires 4/5 Board of Supervisors Approval)
☐ **Interdepartmental Transfer or Interobject Transfer >\$25,000**
 (Requires Board of Supervisors Approval)
☐ **Interobject Transfer <\$25,000**
 (Requires Admin. and Auditor Approval)
☐ **Intraobject Transfer**
 (Requires Auditor Approval)

<u>Org Key:</u>	<u>Object No:</u>	<u>Description</u>	<u>Decrease/ Rev. Increase</u>	<u>Increase</u>
411.15.4040.1000		Transfer-out Interfund -- Fund Balance	\$ 90,500.00	\$ -
411.15.4040.1000.670.000		AB109 Trust Fund - Transfer out	\$ -	\$ 90,500.00
101.50.1215.1000.576.018		Probation Department - Transfer-In	\$ 90,500.00	
101.50.1215.1000.610.101		Probation Department -- (Salary & Benefits Regular)	\$ -	\$ 90,500.00
			\$ -	\$ -
			\$ -	\$ -
			\$ -	\$ -
			\$ -	\$ -
			\$ -	\$ -
Total			\$ 181,000.00	\$ 181,000.00

Comments: Transfer from AB109 Funding

Submitted: Joseph A. Frontella, Jr. 7/11/2019
 Department Head/Authorized Signature Date
 Verification of Sufficient Funds: Leann Godinez 7/12/19
 Auditor-Controller Date
 Approval: Stewart Patri 7/12/19
 Administrative Officer Date

Approval by Board of Supervisors

Attested: _____ Date _____
 Clerk of the Board: _____ Vote: _____ Yes _____ No

AUDITOR USE ONLY

Budget Adjustment No: _____
 Date Batch Input Completed: _____ By: _____