

COUNTY OF LAKE  
OFFICE OF THE AUDITOR-CONTROLLER

COUNTY OF LAKE

**BUDGET TRANSFER**

Fiscal Year: \_\_\_\_\_

<p>Budget Title: _____</p> <p>Budget Unit No. _____</p>	<p><b><i>Budget Transfer #B</i></b> _____</p> <p>(Admin. Office Completes this section)</p>
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**TRANSFER FROM:**

From: Fund \_\_\_\_\_ Dept \_\_\_\_\_  
(000) (0000)

<u>Account</u> (000.00-00)	<u>Account Title</u>	<u>Amount</u>
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____

**TRANSFER TO:**

To: Fund \_\_\_\_\_ Dept \_\_\_\_\_  
(000) (0000)

<u>Account</u> (000.00-00)	<u>Account Title</u>	<u>Amount</u>
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____

***Department's explanation of why savings will be available in the account from which the money is requested to be transferred:***

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

***Department's justification & explanation of why transfer is necessary (A brief statement such as, "To cover anticipated deficit," is not adequate and, therefore, not acceptable.)***

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Authorized Department Signature: \_\_\_\_\_ Date: \_\_\_\_\_

☐ APPROVED ☐ DENIED

\_\_\_\_\_  
COUNTY ADMINISTRATIVE OFFICER                      DATE                      CHAIRPERSON, BOARD OF SUPERVISORS                      DATE

Auditor-Controller Use Only

Date \_\_\_\_\_ JE# \_\_\_\_\_ By: \_\_\_\_\_