

APPROPRIATION ADJUSTMENT REQUEST

2. Department Name Dept. of Finance	Department Name (if applicable) Non-Dept Costs / GF	3. Date 1/28/08
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4. REQUEST ADJUSTMENT OF APPROPRIATION AS LISTED BELOW

SOURCE OF FINANCING	FUND#	INDEX#	ACCOUNT	ACCOUNT TITLE	AMOUNT
SOURCE OF FINANCING	001A	5770000	1011000	Regular Employees	1,000,000
	001A	3233230	169699000	Intra Cost Recovery	1,000,000
USE OF FINANCING	001A	5770000	60148000	Intra Trans Out	1,000,000
	001A	3233230	97979000	Misc Revenues	1,000,000

5. JUSTIFICATION (Attach Memo if Necessary)

Transfer to the Department of Finance to offset reduction in Clerk-Recorder Base Recording Fees.

Department Head <i>[Signature]</i>	Department Head (if applicable) <i>[Signature]</i>
By: <i>[Signature]</i> Date: 1/29/08	By: <i>[Signature]</i> Date: 1/29/08

6. ACTION

Dept. Head Approval(s) only required
 Board Action Required
 Four-Fifths Vote Required

Auditor-Controller
 By: *[Signature]* Date: **1/28/08**

7. APPROVAL

Approve
 Disapprove

County Executive
 By: *[Signature]* Date: _____

8. RESOLUTION

On a motion by Supervisor _____, seconded by Supervisor _____ the foregoing resolution was passed and adopted by the BOARD OF SUPERVISORS of the County of Sacramento, State of California, this _____ day of _____ 19____ by the following vote, to wit:

AYES: Supervisors,
NOES: Supervisors,
ABSENT: Supervisors,

Resolution Number _____

(SEAL)
 ATTEST: _____
 CLERK OF THE BOARD OF SUPERVISORS

CHAIR OF THE BOARD OF SUPERVISORS OF SACRAMENTO COUNTY CALIFORNIA