



County Of Fresno

Request for Adjustment or Additional Appropriation – BOS

Department: Public Health

Date: March 3, 2026

Oscar J. Garcia, CPA, Auditor-Controller/Treasurer-Tax Collector:

Please report as to proper accounting form and available balances and forward to County Administrative Officer for recommendation.

Budget Transfer Number:

55

Total of all pages:

\$30,000.00

Transfer FROM Account Title	Required	Required	Required	Required	Required	Required	Required
	Account (4 Char.)	Fund (4 Char.)	Org (4 or 8 Char.)	Program (5 Char.)	Subclass (5 Char.)	Budget Year	Amount Debit or (Credit)
PROF & SPEC SERVICES	7295	0001	56201508	0	10000	2026	(\$30,000.00)
Transfer TO Account Title							
EQUIPMENT	8300	0001	56201508	92094	10000	2026	\$30,000.00

Reason for Adjustment:

Transfer of funds to purchase a Deionization Water System

Board of Supervisors: Approved: Disapproved:

Referred to: _____

Clerk of the Board By: _____ [Sign] Double click!