COUNTY OF SAN MATEO APPROPRIATION TRANSFER REQUEST						REQUEST NO. ATR25-BJ075	
DEPARTMENT: Human Services Agency						DATE: 03/21/2025	
1. REQUEST	TRANSFER O		TION AS LIS	STED BELOW:			
	CODES					DECODIDITION	
	FUND or ORG	ACCOUNT	JL ORG CODE Measure K only	AMOUNT		DESCRIPTION	
FROM	75103	1135	HSASH	\$19,435	Sales and	I Use Tax	
то	75103	5858	HSASH	\$19,435	Other Pro	fessional Contract Services	
Justification	(Attach Memo	if Necessary): F	Please see attached	d memo.			
	( .	Signed by:					
DEPARTMENT HEAD Huili Iten F68DBB1BC8E64DA					DATE 3/24/2025		
2. 🛛 Board Remarks:	Action Require	ed 🛛 F	our-Fifths Vot	te Required		Board Action Not Require	
Kemarks.							
		ocuSigned by:					
COUNTY CONTROLLER					DATE 3/24/2025		
3. 🛛 Appro	ve as Requeste	ed 🛛 🖌	Approve as Re	vised		Disapproved	
	•						
Remarks:	Docu	Signed by:					
	CUTIVE Koloc	rto Mandiia			DATE 3/2	24/2025	
Remarks: COUNTY EXE	CUTIVE	<b>rto Manduia</b> A926843D471				24/2025 ORS USE ONLY	
Remarks: COUNTY EXE	CUTIVE Kolic 5178. DO NOT WRITI	<b>No Manduia</b> A926843D471 E <b>BELOW THI</b> S D OF SUPERVISC	<mark>s line – For</mark> Drs, county o		JPERVIS	ORS USE ONLY	
Remarks: COUNTY EXE	CUTIVE Kolic 5178. DO NOT WRITI	<b>No Manduia</b> A926843D471 E <b>BELOW THI</b> D OF SUPERVISC RES	<b>S LINE – FOR</b> DRS, COUNTY O SOLUTION TRAI	<b>R BOARD OF SU</b> F SAN MATEO, ST	JPERVISO ATE OF CA S	ORS USE ONLY	
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