

COUNTY OF SAN MATEO APPROPRIATION TRANSFER REQUEST			REQUEST NO. <u>ATR 22-019</u>
			DATE: October 25, 2021
1. REQUEST TRANSFER OF APPROPRIATION AS LISTED BELOW:			
	CODES		
	FUND OR ORG	ACCOUNT	AMOUNT
FROM	57022	1691	225,000
TO	57022	4128	90,000
	57022	6312	135,000
Justification (Attach Memo if Necessary): This budget adjustment will allow AAS to implement HOME SAFE program through intensive case management of Adult Protect Services clients and providing direct financial assistance to them for short-term housing needs.			
DEPARTMENT HEAD <i>Jina Wilson</i>		<i>Louise F. Rogers</i> <small>Louise F. Rogers (Oct 25, 2021 13:29 PDT)</small>	DATE 10/25/2021 10/25/2021
2. <input type="checkbox"/> Board Action Required <input checked="" type="checkbox"/> Four-Fifths Vote Required <input type="checkbox"/> Board Action Not Required			
COUNTY CONTROLLER <i>WBR</i>		DATE 11/4/2021	
3. <input type="checkbox"/> Approve as Requested <input type="checkbox"/> Approve as Revised <input type="checkbox"/> Disapproved			
COUNTY MANAGER <i>[Signature]</i>		DATE 11/9/21	
DO NOT WRITE BELOW THIS LINE – FOR BOARD OF SUPERVISORS USE ONLY			

BOARD OF SUPERVISORS, COUNTY OF SAN MATEO, STATE OF CALIFORNIA
RESOLUTION TRANSFERRING FUNDS

RESOLUTION NO. _____

RESOLVED, by the Board of Supervisors of the County of San Mateo, that

WHEREAS, the Department hereinabove named in the Request for Appropriation, Allotment or Transfer of Funds has requested the transfer of certain funds as described in said Request; and

WHEREAS, the County Controller has approved said Request as to accounting and available balances, and the County Manager has recommended the transfer of funds as set forth hereinabove:

NOW, THEREFORE, IT IS HEREBY ORDERED AND DETERMINED that the recommendations of the County Manager be approved and that the transfer of funds as set forth in said Request be effected.

Regularly passed and adopted this _____ day of _____, 20____

Ayes in favor of said resolution:
Supervisors: _____

Noes and against said resolution:
Supervisors: _____

Absent
Supervisors: _____

PRESIDENT, BOARD OF SUPERVISORS
COUNTY OF SAN MATEO

ATTEST: _____
Clerk of Said Board

DISTRIBUTION: Board of Supervisors – Controller – County Manager – Department - Treasurer