

<b>COUNTY OF SAN MATEO APPROPRIATION TRANSFER REQUEST</b>				REQUEST NO. ATR22-072	
DEPARTMENT: County Health-Family Health Services				DATE: 05/04/2022	
<b>1. REQUEST TRANSFER OF APPROPRIATION AS LISTED BELOW:</b>					
	<b>CODES</b>			<b>AMOUNT</b>	<b>DESCRIPTION</b>
	<b>FUND or ORG</b>	<b>ACCOUNT</b>	<b>JL ORG CODE Measure K only</b>		
<b>FROM</b>	62411	1871		750,000	All Other State Aid State PH Categorical Aid
	62411	1758		1,125,292	
<b>TO</b>	62411	5856		1,447,721	Contract Special Program Services All Other Service Charges
	62411	6739		427,571	
<b>Justification (Attach Memo if Necessary):</b> See attached memo					
<b>DEPARTMENT HEAD</b> <i>DocuSigned by: Louise P. Rogers</i> <small>5EA0DB8B58304D3...</small>				<b>DATE</b> 5/5/2022	
<b>2.</b> <input type="checkbox"/> Board Action Required <input checked="" type="checkbox"/> <b>Four-Fifths Vote Required</b> <input type="checkbox"/> Board Action Not Required <b>Remarks:</b>					
<b>COUNTY CONTROLLER</b> <i>DocuSigned by: Ngoe Nguyen</i> <small>311A76FBA8404C2...</small>				<b>DATE</b> 5/6/2022	
<b>3.</b> <input checked="" type="checkbox"/> <b>Approve as Requested</b> <input type="checkbox"/> Approve as Revised <input type="checkbox"/> Disapproved <b>Remarks:</b>					
<b>COUNTY EXECUTIVE</b> <i>DocuSigned by: Roberto Manelcia</i> <small>B2CAA10C3C9341B...</small>				<b>DATE</b> 5/6/2022	
<b>DO NOT WRITE BELOW THIS LINE – FOR BOARD OF SUPERVISORS USE ONLY</b>					

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 Executive has recommended the transfer of funds as set forth hereinabove:

NOW, THEREFORE, IT IS HEREBY ORDERED AND DETERMINED that the recommendations of the County Executive 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 and in favor of said resolution:

NOES and against said resolution:

Supervisors: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Supervisors: \_\_\_\_\_  
 \_\_\_\_\_  
 Absent \_\_\_\_\_  
 Supervisors: \_\_\_\_\_

\_\_\_\_\_  
 PRESIDENT, BOARD OF SUPERVISORS  
 COUNTY OF SAN MATEO

ATTEST: \_\_\_\_\_  
 Clerk of Said Board