	REQUEST NO. ATR24-B0041						
DEPARTMENT:	DATE: 1/30/24						
1. REQUEST	TRANSFER O	F APPROPRI <i>I</i>	ATION AS LIS	TED BELOW:			
CODES							
	FUND or ORG	ACCOUNT	JL ORG CODE Measure K only	AMOUNT	DESCRIPTION		
FROM	70115	2646		\$100,000	Gifts and Donations		
то	70115	5858		\$100,000	Other Professional Contract Svcs		
Justification (;	\$100,000 to HSA fro	m Sillicon Valley Comm	ed unanticipated revenue in the amount on nunity Foundation as a grant for The Big L		
Department Head Decusioned by: communications and strategy consultancy. Department Head Date 1/30/2024							
2. Board	Action Require		our-Fifths Vot	e Required	☐ Board Action Not Req	uire	
Remarks:							
DocuSigned by:							
COUNTY CONTROLLER Note Name of the Country Controller (1/3) 311A76FBA8404C2					ATE 1/31/2024		
3. ☑ Approve as Requested ☐ Approve as Revised ☐					Disapproved		
Remarks:							
	(signed by: Ho Manchia					
COUNTY EXEC	ATE 1/31/2024						
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.							
RESC	OLVED, by the B	oard of Supervis	ors of the Count	y of San Mateo, tha	at		
				e Request for Appro as described in said	opriation, Allotment or d Request; and		
				Request as to accou as set forth hereina	unting and available balances, and above:	I	
				TERMINED that the orth in said Reques	recommendations of the County t be effected.		
Regularly passed and adopted this				_day of	20		
AYES and in favor of said resolution:				NOES and ag	gainst said resolution:		
Supervisors	:			upervisors:			
			Ab	sent			
				pervisors:			
	PRESIDENT, BOARD OF SUPERVISORS						
ATTEST:			_	COUN	NTY OF SAN MATEO		
2011	Clerk of	Said Board					