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	(COUNTY OF	A5C10 SAN MATEO			REQUEST NO.	
	ATR23-B0023						
DEPARTMENT: 5550B PUBLIC HEALTH POLICY AND PLANNING						DATE: 10/14/2022	
L. REQUES	T TRANSFER O	F APPROPRIA	ATION AS LIS	TED BELOW:			
		CODES AMOU				DESCRIPTION	
	FUND or ORG	ACCOUNT	JL ORG CODE Measure K only				
FROM	×	×	X	X	Please se within Do	e attached ATR due to form limitation cuSign.	
то	×		х	x	Please see attached ATR due to form limitatio within DocuSign.		
Justification	(Attach Memo	if Necessary):	Please see attached	ATR due to form li	mitations within	DocuSign.	
	Docus	Signed by:					
						TE 10/17/2022	
2. 🗆 Board	d Action Require	ed 🛛 F	our-Fifths Vot	e Required		Board Action Not Require	
Remarks:							
		ocuSigned by:					
COUNTY CONTROLLER Nige Nigger DATE 1						/17/2022	
3. 🛛 Appro	ove as Requeste	ed	Approve as Rev	vised		Disapproved	
Remarks:							
	Rata	isigned by: No Mandua			DATE 10,	/17/2022	
COUNTY EXI	B2C/				<u> </u>	DRS USE ONLY	
		D OF SUPERVISC					
				SFERRING FUN			
		RES	OLUTION NO.			_	
RE	SOLVED, by the B	oard of Supervis	ors of the Count	y of San Mateo,	that		
W/F	IEREAS, the Depa			e Request for Ar	nronriation		
	Funds has reques	sted the transfer	of certain funds				
Transfer of				as described in	said Reques	t; and	
Transfer of WF		ity Controller has	approved said	as described in Request as to ac	said Reques		
Transfer of WH the County NO	IEREAS, the Coun Executive has rec	ty Controller has commended the t IT IS HEREBY OR	approved said I ransfer of funds DERED AND DE	as described in Request as to ac as set forth her TERMINED that	said Reques counting an einabove: the recommo	t; and d available balances, and endations of the County	
Transfer of WH the County NO Executive b	IEREAS, the Coun Executive has rec W, THEREFORE, 1	ty Controller has commended the t IT IS HEREBY OR hat the transfer of	approved said I ransfer of funds DERED AND DE of funds as set f	as described in Request as to ac as set forth her TERMINED that orth in said Req	said Reques counting an einabove: the recommo uest be effect	t; and d available balances, and endations of the County ted.	
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Transfer of WH the County NO Executive b Re AY	HEREAS, the Coun Executive has rec W, THEREFORE, 1 be approved and t gularly passed a	ty Controller has commended the t IT IS HEREBY OR that the transfer and adopted this of said resolution	approved said I ransfer of funds DERED AND DE of funds as set f	as described in Request as to ac as set forth her TERMINED that orth in said Req day of NOES and	said Reques counting an einabove: the recommo uest be effect against sa	t; and d available balances, and endations of the County ted. 20	
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Transfer of WH the County NO Executive b Re AY	HEREAS, the Coun Executive has rec W, THEREFORE, 1 be approved and t gularly passed a ES and in favor	ty Controller has commended the t IT IS HEREBY OR that the transfer and adopted this of said resolution	approved said I ransfer of funds DERED AND DE of funds as set f S on: Si Si	as described in Request as to ac as set forth her TERMINED that orth in said Req day of NOES and upervisors: osent upervisors:	said Reques counting and einabove: the recommo uest be effect against sa	t; and d available balances, and endations of the County cted. 20 id resolution:	
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COUNTY OF SAN MATEO APPROPRIATION TRANSFER REQUEST

REQUEST NO.

1. Keyuesi	IEST TRANSFER OF APPROPRI		la ilon as lls i el	J BELOW:		
	FUND OR ORG	ACCOUNT	AMOUNT	DESCRIPTION		
	62220	1752	2,167,134	State Aid - CD		
	62300	1752	534,419	State Aid - CD	РН	
FROM	62210	1752	440,100	State Aid - CD	РН	
	62230	2539	78,900	IFR - SMCGH		
	62350	2378	49,144	Other Reimbur	rsements	
то	62220	4128	2,167,134	Regular Pay Adjustments		
	62300	4128	534,419	Regular Pay Adjustments		
	62210	4128	440,100	Regular Pay Adjustments		
	62230	4128	78,900	Regular Pay A	djustments	
	62350	4128	49,144	Regular Pay A	djustments	
DEPARTMENT HEAD Date 2. □ Board Action Required □ Four-Fifths Vote Required □ Board Action Not Figure 1						
COUNTY CON	ITROLLER		D	ATE		
3. 🗆 Appro	ve as Requeste	ed 🗆	Approve as Revise	d	Disapproved	
COUNTY MAN	NAGER	D	ATE			
D	O NOT WRITE	BELOW TH	IS LINE - FOR BO	ARD OF SUP	ERVISORS USE ONLY	
	BOARE	R	SORS, COUNTY OF SAN ESOLUTION TRANSFEI		e of California	

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

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