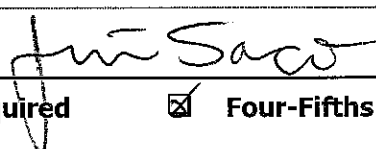

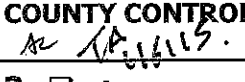



COUNTY OF SAN MATEO APPROPRIATION TRANSFER REQUEST				REQUEST NO. APR 15-025
NON-DEPARTMENTAL SERVICES (8000B)				12/09/14
1. REQUEST TRANSFER OF APPROPRIATION AS LISTED BELOW:				
	CODES			
	FUND OR ORG	ACCOUNT	AMOUNT	DESCRIPTION
FROM	80125	1135	39,860	Sales & Use Tax - Measure A
TO	80125	6265	39,860	Miscellaneous Other Contribution
Justification (Attach Memo if Necessary): To reimburse North Peninsula Food Pantry and Dining Center of Daly City for roof replacement for their facility located at 31 Bepier Street in Daly City. The Center leases the property from the Daly City RDA Successor Agency for \$1 per year to serve hot meals and provide emergency food distribution to needy low-income residents of the North San Mateo County.				
DEPARTMENT HEAD 			DATE 12/09/14	
2. <input type="checkbox"/> Board Action Required <input checked="" type="checkbox"/> Four-Fifths Vote Required <input type="checkbox"/> Board Action Not Required				
				
COUNTY CONTROLLER 			DATE 1/6/15	
3. <input type="checkbox"/> Approve as Requested <input type="checkbox"/> Approve as Revised <input type="checkbox"/> Disapproved				
COUNTY MANAGER 			DATE 1-8-15	
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 an in favor of said resolution:
Supervisors: _____

Noes and against said resolution:
Supervisors: _____

Absent
Supervisors: _____

ATTEST: _____
Clerk of Said Board

PRESIDENT, BOARD OF SUPERVISORS
COUNTY OF SAN MATEO