

COUNTY OF SAN MATEO APPROPRIATION TRANSFER REQUEST				REQUEST NO. ATR17-032
NON-DEPARTMENTAL (8000B) AND CAPITAL PROJECTS (8500D)				03/14/17
1. REQUEST TRANSFER OF APPROPRIATION AS LISTED BELOW:				
	CODES		AMOUNT	DESCRIPTION
	FUND OR ORG	ACCOUNT		
FROM	80110	7111	\$200,000	Fixed Assets - Land
	85170	2731	\$200,000	Operating Transfer In
TO	80110	7546	\$200,000	Operating Transfer Out – Cap Projects
	85170	7211	\$200,000	Fixed Assets – Structure/Improvements
Justification (Attach Memo if Necessary): This ATR in the amount of \$400,000 funds needed capital improvement projects totaling \$200,000 identified during the County's due diligence for the acquisition of the property located at 225 Cabrillo Highway South, Building A, in the City of Half Moon Bay. This ATR also accounts for operating transfers between funds.				
DEPARTMENT HEAD		DATE		3/9/17
2. ☐ Board Action Required ☒ Four-Fifths Vote Required ☐ Board Action Not Required				
COUNTY CONTROLLER		DATE		3/9/17
3. ☒ Approve as Requested ☐ Approve as Revised ☐ Disapproved				
COUNTY MANAGER		DATE		3-9-17
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: _____
_____ Absent _____
_____ Supervisors: _____

Noes and against said resolution: _____
Supervisors: _____
_____ Absent _____
_____ Supervisors: _____

ATTEST: _____
Clerk of Said Board

PRESIDENT, BOARD OF SUPERVISORS
COUNTY OF SAN MATEO

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