

COUNTY OF SAN MATEO				REQUEST NO.	
APPROPRIATION TRANSFER REQUEST				ATR 10 - 028	
DEPARTMENT				DATE	
Planning & Building				1/11/10	
1. REQUEST TRANSFER OF APPROPRIATIONS AS LISTED BELOW:					
	C O D E S				
	FUND OR ORG.	ACCOUNT	AMOUNT		DESCRIPTION
From	38430	2652	167,714 00		Project Cost Reimbursement - unanticipated revenue
To	38430	5858	167,714		Other Professional Contract Services
Justification. (Attach Memo if Necessary)					
Please see attached memo.					
				DEPARTMENT HEAD	
				BY: <i>[Signature]</i>	DATE 1/11/2010
2. <input type="checkbox"/> Board Action Required <input checked="" type="checkbox"/> Four-Fifths Vote Required <input type="checkbox"/> Board Action Not Required					
Remarks:					
				COUNTY CONTROLLER	
				BY: <i>[Signature]</i>	DATE 1/12/10
3. <input checked="" type="checkbox"/> Approve as Requested <input type="checkbox"/> Approve as Revised <input type="checkbox"/> Disapprove					
Remarks:					
				COUNTY MANAGER	
				BY: <i>[Signature]</i>	DATE 1/19/2010

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. 070610

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 26TH day of JANUARY, 2010.

Ayes and in favor of said resolution:

Noes and against said resolution:

Supervisors: MARK CHURCH  
CAROLE GROOM  
RICHARD S. GORDON  
ROSE JACOBS GIBSON  
ADRIENNE J. TISSIER

Supervisors: NONE  
Absent Supervisors: NONE

ATTEST:

*[Signature]*  
Clerk of Said Board

PRESIDENT *[Signature]*, BOARD OF SUPERVISORS  
COUNTY OF SAN MATEO

Certificate of Delivery

(Government Code Section 25103)  
I certify that a copy of the original document filed in the Office of the Clerk of the Board of Supervisors of San Mateo County has been delivered to the President of the Board of Supervisors.

*[Signature]*  
Deputy Clerk of the Board of Supervisors

070610

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