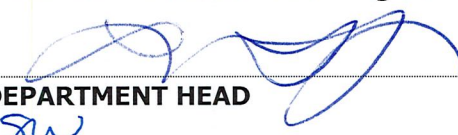




COUNTY OF SAN MATEO APPROPRIATION TRANSFER REQUEST				REQUEST NO. ATR 20-023
HEALTH / EMERGENCY MEDICAL SERVICES (5600B) / HEALTH IT (5560B)				DATE: 12/26/2019
1. REQUEST TRANSFER OF APPROPRIATION AS LISTED BELOW:				
	CODES			
	FUND OR ORG	ACCOUNT	AMOUNT	DESCRIPTION
FROM	56110	1762	1,350,000	EMS SAFR Grant
	55613	8142	1,300,000	Health IT Information Exchange
TO	56110	5873	1,300,000	In-House Data Processing Svc for Health IT
	56110	5969	50,000	Other Special Dept Expense for EMS grant oversight
	55613	4128	910,000	Health IT Staffing
	55613	5918	390,000	Health Information Exchange contract
Justification (Attach Memo if Necessary): Please see attached memo regarding the EMS SAFR Grant.				
DEPARTMENT HEAD 				DATE 1/8/2020
2. <input type="checkbox"/> Board Action Required <input type="checkbox"/> Four-Fifths Vote Required <input type="checkbox"/> Board Action Not Required				
COUNTY CONTROLLER 				DATE 1/9/20
3. <input checked="" type="checkbox"/> Approve as Requested <input type="checkbox"/> Approve as Revised <input type="checkbox"/> Disapproved				
COUNTY MANAGER 				DATE 1/9/20
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