

COUNTY OF SAN MATEO APPROPRIATION TRANSFER REQUEST				REQUEST NO.
DEPARTMENT			DATE	
HEALTH DEPT./ PUBLIC HEALTH			4/18/05	
1. REQUEST TRANSFER OF APPROPRIATIONS AS LISTED BELOW:				
	C O D E S		AMOUNT	DESCRIPTION
	FUND OR ORG.	ACCOUNT		
From	62050	1872	221,354   00	State Aid - Anti Terrorism
	16111	8142	221,354   00	Intra Fund Transfer
To	16111	5834	221,354   00	Contract Legal Expense
	62050	5874	221,354   00	Payment to County Counsel
Justification. (Attach Memo if Necessary) Additional funds as a result of the amendment to the agreement with the State for bioterrorism prep. activities.				
			DEPARTMENT HEAD BY:  DATE: _____	
2. <input type="checkbox"/> Board Action Required <input type="checkbox"/> Four-Fifths Vote Required <input type="checkbox"/> Board Action Not Required Remarks: _____				
			COUNTY CONTROLLER BY: _____ DATE: _____	
3. <input type="checkbox"/> Approve as Requested <input type="checkbox"/> Approve as Revised <input type="checkbox"/> Disapprove Remarks: _____				
			COUNTY MANAGER BY: _____ DATE: _____	

**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 \_\_\_\_\_, 19\_\_\_\_.

Ayes and in favor of said resolution:  
 Supervisors: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Noes and against said resolution:  
 Supervisors: \_\_\_\_\_  
 \_\_\_\_\_  
 Absent  
 Supervisors: \_\_\_\_\_

ATTEST:  
 \_\_\_\_\_  
 Clerk of Said Board

\_\_\_\_\_  
 CHAIRMAN, BOARD OF SUPERVISORS  
 COUNTY OF SAN MATEO

DISTRIBUTION:	-- BOARD OF SUPERVISORS
WHITE	-- CONTROLLER
GREEN	-- COUNTY MANAGER
CANARY	-- DEPARTMENT
PINK	-- TREASURER
GOLDENROD	