

**COUNTY OF SAN MATEO
APPROPRIATION TRANSFER REQUEST**

REQUEST NO.

DEPARTMENT: MENTAL HEALTH SERVICES AGENCY DATE: Feb. 6, 2006

1. LIST TRANSFER OF APPROPRIATIONS AS LISTED BELOW:

	C O D E S		AMOUNT	DESCRIPTION
	FUND OR ORG.	ACCOUNT		
From	61101	2372	761,172.00	Medi-Cal FFP
	61101	2375	98,741.00	Third Party Reimbursement
	61101	2378	98,742.00	Other Reimbursements
	61101	1745	3,607,635.00	Mental Health Services Act (MHSA)
			4,566,290.00	
To	See Attached		4,566,290.00	See Attached

Justification. (Attach Memo if Necessary)

San Mateo Mental Health is expecting to receive final approval of our Mental Health Services Plan within the next couple of weeks. Through the proposal, Mental Health will receive a total of \$4,566,290 for FY 05/06.

DEPARTMENT HEAD

BY: Chelene A. Silva DATE: 2/7/06

2. Board Action Required Four-Fifths Vote Required Board Action Not Required

Remarks:

COUNTY CONTROLLER

BY: _____ DATE: _____

3. Approve as Requested Approve as Revised 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:

Noes and against said resolution:

Supervisors: _____

Supervisors: _____

 Absent
 Supervisors: _____

EST:

 CHAIRMAN, BOARD OF SUPERVISORS
 COUNTY OF SAN MATEO

 Clerk of Said Board

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