

<b>COUNTY OF SAN MATEO</b>			REQUEST NO. ATR7 003
<b>APPROPRIATION TRANSFER REQUEST</b>			
DEPARTMENT Aging and Adult Services Dept 5700B			DATE 09/19/06
1. REQUEST TRANSFER OF APPROPRIATIONS AS LISTED BELOW:			
	C O D E S		
	FUND OR ORG.	ACCOUNT	DESCRIPTION
From	57022	2655	58,500   00 OTHER FOUNDATION GRANTS
	57022	8142	58,500   00 OTHER INTRAFUND TRANSFERS
	57022	1684	109,900   00 REALIGNMENT SALES TAX - PUBLIC ASSISTANCE
To	57022	4111	166,839   00 REGULAR HOUR - PERM POSITIONS
	57022	4311	60,061   00 FICA
Justification. (Attach Memo if Necessary) Appropriation of funds to support the cost of the HOME TEAM PILOT project for the period December 1, 2006 through June 30, 2007. There is no net County cost.			
			DEPARTMENT HEAD
			BY: <i>Charlene A. Silva</i> DATE: <i>9/25/06</i>
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>M.A.</i> DATE: <i>9.25.06</i>
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:

Noes and against said resolution:

Supervisors: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Supervisors: \_\_\_\_\_  
 \_\_\_\_\_  
 Absent  
 Supervisors: \_\_\_\_\_

ATTEST:

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

\_\_\_\_\_  
 Clerk of Said Board

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