

**COUNTY OF SAN MATEO
APPROPRIATION TRANSFER REQUEST**

REQUEST NO.
ATR7 034

DEPARTMENT
San Mateo Medical Center

DATE
02-07-07

REQUEST TRANSFER OF APPROPRIATIONS AS LISTED BELOW:

	C O D E S		AMOUNT	DESCRIPTION
	FUND OR ORG.	ACCOUNT		
From	66708	7311	210,000.00	Fixed Assets-Equipment
To	66705	5459	20,000.00	Misc. Other Maintenance Expenses
	66705	7546	190,000.00	Operating Transfer Out-Cap. Proj.

Justification. (Attach Memo if Necessary) To transfer appropriation from Fixed Assets-Equipment in #66708 to Operating Transfer Out-Cap. Project, and Misc. Other Maintenance Expenses in budget unit #66705 to reimburse Public Works for facility projects costs. There is no change in Net County Cost.

FY06-07

DEPARTMENT HEAD

BY: *[Signature]*

DATE
2/7/2007

Board Action Required

Four-Fifths Vote Required

Board Action Not Required

Remarks:

COUNTY CONTROLLER

BY: *[Signature]*

DATE
2-8-07

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: _____

County of San Mateo

Health Services Agency

ATR/AER Form

Controller's ATR Number

Department: Health Services Agency

Division: San Mateo Medical Center

Type of Transaction: ATR AER
Status of Transaction: One-Time On-Going

Title: S. M. M. C. - Capital Purchase(Equipment and Projects)

Justification: To transfer appropriation from Fixed Assets-Equipment in #66708 to Operating Transfer Out-Cap. Project, and Misc. Other Maintenance Expenses in budget unit #66705 to reimburse Public Works for facility projects costs.
There is no change in Net County Cost.

FY06-07

TO BP: 67500BP	Total:	210,000.00
FROM BP: 67500BP	Total:	210,000.00
Net Change:		0.00

From/To	Subobject	Account Description	Transfer Amt.
66708	7311	Fixed Assets-Equipment	(210,000.00)
66705	5459	Misc. Other Maintenance Expenses	20,000.00
66705	7546	Operating Transfer Out-Cap. Proj.	190,000.00

Appropriation Total 0.00

Revenue Total 0.00

Net County Cost 0.00