

**COUNTY OF SAN MATEO
APPROPRIATION TRANSFER REQUEST**

REQUEST NO.
ATR8-015

DEF ENT San Mateo Medical Center

DATE 11-30-07

1. REQUEST TRANSFER OF APPROPRIATIONS AS LISTED BELOW:

	C O D E S		AMOUNT	DESCRIPTION
	FUND OR ORG.	ACCOUNT		
From	68470	2654	400,000 00	Hospital Foundation Contribution
To	68470	7211	400,000 00	Fixed Assets-Structure/Improvement

Justification. (Attach Memo if Necessary) This ATR will appropriate funding to pay for the renovation of the Fair Oaks Children's Clinic, which occupies an aging modular structure in Redwood City, is deteriorating and presents environmentally and physically compromised conditions for both patients and staff. There is no Net County Cost.

DEPARTMENT HEAD

BY: *[Signature]* DATE 11/30/07

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

Remarks:

COUNTY CONTROLLER

BY: *[Signature]* DATE 12.3.07

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: _____