COUNTY OF SAN MATEO APPROPRIATION TRANSFER REQUEST DEPARTMENT Health System - Community Health 11-18-09 1. REQUEST TRANSFER OF APPROPRIATIONS AS LISTED BELOW: CODES FUND OR ORG. ACCOUNT AMOUNT DESCRIPTION see attached see attached From To Justification. (Attach Memo if Necessary) To recognize funds from California Department of Public Health for Public Health emergency preparedness programs and H1M1 response per EPO P3-41. There is no additional Net County Cost as a result of this ATR. Four-Fifths Vote Required ☐ Board Action Not Required 2. Board Action Required Remarks: COUNTY CONTROLLER 3. Approve as Requested ☐ Approve as Revised ☐ Disapprove Remarks: COUNTY MANAGER 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 _ Noes and against said resolution: Ayes and in favor of said resolution: Supervisors: _ Supervisors: Absent Supervisors: ATTEST: CHAIRMAN, BOARD OF SUPERVISORS COUNTY OF SAN MATEO Clerk of Said Board

DISTRIBUTION:

REQUEST NO