COUNTY OF SAN MATEO APPROPRIATION TRANSFER REQUEST DEPARTMENT Realth System - Family Health Services 62403 12/29/09 1. REQUEST TRANSFER OF APPROPRIATIONS AS LISTED BELOW: CODES AMOUNT DESCRIPTION ACCOUNT FUND OR ORG. State Aid - WIC 158,396 100 1753 62420 From Regular Hour - Perm Positions 100 4111 48,396 62420 To 0.0 Other Special Dept Expense 110,000 5969 62420 Justification. (Attach Memo if Necessary) To recognize funds from the California Department of Public Mealth Women, Infants and Children for increased caseload There is no additional Net County Cost as a result of work. this ATR. DEPARTMENT HEAD 18 trase, 3000009 Board Action Not Required □ Four-Fifths Vote Required 2. | Board Action Required Remarks: COUNTY CONTROLLER DATE □ Disapprove Approve as Revised 3. Approve as Requested 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. _, 19___ Regularly passed and adopted this ___ ____ day of __ Noes and against said resolution: Ayes and in favor of said resolution: Supervisors: Supervisors: _ Supervisors: . CHAIRMAN, BOARD OF SUPERVISORS ATTEST: COUNTY OF SAN MATEO Clerk of Said Board

DISTRIBUTION:

WHITE — BOARD OF SUPERVISORS

GREEN — CONTROLLER

CANARY — COUNTY MANAGER

PINK

GOLDENROD — TREASURER

REQUEST NO.