## COUNTY OF SAN BENITO BUDGET ADJUSTMENT/TRANSFER

				Please In	dicate Type:	
Fiscal Year: Department:	2018-2019  Health & Human Services			х	Appropriation/Est. Revenue Increase (Requires 4/5 Board of Supervisors Approval) Contingency Transfer	
	- Indian Solution			(Requires 4/5 Board of Supervisors Approval)		
Org Key:	Human Services - C	uman Services - CSWD NOVA			Interdepartmental Transfer or Interobject Transfer>\$25,000 (Requires Board of Supervisors Approval) Interobject Transfer<\$25,000 (Requires Admin. and Auditor Approval) Intraobject Transfer	
					(Requires Auditor Approval)	
LOG	OS#		Description		Exp. Decrease/ Rev. Increase	Exp. Increase Rev. Decreas
240.80.2555.2600.55	1.500	State Grant Pass through			43,800	
240.80.2555.2600.610	0.905	Force Labor				30,408
240.80.2555.2600.619.196		Lodging				2,176
240.80.2555.2600.630.101		Other Charges - Community	Programs			11,216
					· ·	
		·				
Total					\$ 43,800	\$ 43,800
Comments: -	Increase in funding fo	or Grant Agreement 002-1122-18	3 Modification #1			
- Submitted:	Cynthia Larca	·			01/16/2019	- In the second
		/Anthorized Signature			Date	-
Verification of Sufficient Funds:	Auditor-Controller	Day )	5		1/16/19 Date	-1
Administrative Officer					Date	
approval by Board	of Supervisors		*			
					Date	-
ttested: lerk of the Board:					Vote:Yes _	No
UDITOR USE ON	LY					
udget Adjustment	No:					
ate Batch Input Co	mpleted:		Ву:			