

\_\_\_\_\_

<b>Fiscal Year:</b>	19/20
<b>Department:</b>	RMA (Inclusionary Housing)
<b>Org Key:</b>	288.70.3295.1000

11

(Requires Auditor Approval)

Comments:	<p>The following budget adjustment is to appropriate funds towards a feasibility study on the in-lieu fees for rental and ownership housing. The study is proposed to be completed by June 30, 2020. Prior to FY18/19 the inclusionary housing program had been inactive with minimal to no revenues or projects. With changes in fee structure revenue collection is expected to reach approximately \$550,000 and the program will move forward beginning with the feasibility study.</p>
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Vote: \_\_\_\_\_ Yes \_\_\_\_\_ No

## By: \_\_\_\_\_

**COUNTY OF SAN BENITO  
BUDGET ADJUSTMENT/TRANSFER**

Please Indicate Type:

Fiscal Year: 19/20

Department: Multiple - General Fund

Org Key: Multiple - General Fund

☐

**Appropriation/Est. Revenue Increase**

(Requires 4/5 Board of Supervisors Approval)

☐

**Contingency Transfer**

(Requires 4/5 Board of Supervisors Approval)

☒

**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)

LOGOS #	Description	Exp. Decrease/ Rev. Increase	Exp. Increase Rev. Decrease
101.15.1015.1000.619.250	Services and Supplies - Special Dept - Contracts	600,000	
101.45.1205.1000.610.101	Salary and Benefits - Regular (District Attorney)		340,000
101.35.1170.1000.610.107	Salary and Benefits - Sick Paid Out (Assessor)		62,000
101.35.1170.1000.610.108	Salary and Benefits - Vacation Paid Out (Assessor)		42,000
101.15.1075.1000.610.101	Salary and Benefits - Regular (GIS)		22,000
101.15.1005.1000.610.101	Salary and Benefits - Regular (Clerk of the Board)		10,000
101.25.1210.1000.610.101	Salary and Benefits - Regular (Counsel)		68,000
101.25.1210.1000.610.701	Salary and Benefits - Public Service Retirement (Counsel)		50,000
101.25.1210.1000.610.118	Salary and Benefits - Bonus Pay		6,000
<b>Total</b>		<b>\$ 600,000</b>	<b>\$ 600,000</b>

Comments: Corrections made for unexpected salary adjustments and accrual pay outs in multiple departments. No increase to total overall appropriations.

Submitted:

Department Head/Authorized Signature

Date

Verification of

Sufficient Funds:

Auditor-Controller

Date

Approval:

Administrative Officer

Date

**Approval by Board of Supervisors**

Date

Attested:

Clerk of the Board:

Vote: \_\_\_\_\_ Yes \_\_\_\_\_ No

**AUDITOR USE ONLY**

Budget Adjustment No: \_\_\_\_\_

Date Batch Input Completed: \_\_\_\_\_

By: \_\_\_\_\_

**Please Indicate Type:**

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(Requires 4/5 Board of Supervisors Approval)

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(Requires 4/5 Board of Supervisors Approval)

☒

(Requires Board of Supervisors Approval)

(Requires Admin. and Auditor Approval)

(Requires Auditor Approval)

Comments:

Submitted:

Date \_\_\_\_\_

**Sufficient Funds:**

Date \_\_\_\_\_

Approval:

Administrative Officer

Date \_\_\_\_\_

**Approval by Board of Supervisors**

Date \_\_\_\_\_

Attested:

Clerk of the Board: \_\_\_\_\_

Vote: \_\_\_\_\_ Yes \_\_\_\_\_ No

Budget Adjustment No:

Date Batch Input Completed:

By:

**COUNTY OF SAN BENITO  
BUDGET ADJUSTMENT/TRANSFER**

Please Indicate Type:

Fiscal Year: 19/20

Department: Resource Management Agency

Org Key: 101.70.1295.1000

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**Appropriation/Est. Revenue Increase**

(Requires 4/5 Board of Supervisors Approval)

☐

**Contingency Transfer**

(Requires 4/5 Board of Supervisors Approval)

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**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)

LOGOS #	Description	Exp. Decrease/ Rev. Increase	Exp. Increase Rev. Decrease
101.70.1295.1000.610.101	Salary and Benefits - Regular (Admin & Engineering)	265,000	
101.70.1290.1000.610.301	Salary and Benefits - Overtime (Maintenance)		10,000
101.65.1265.1000.610.101	Salary and Benefits - Regular (Planning)		15,000
101.70.1295.1000.619.222	Services and Supplies - Other Consultants (Admin & Engineering)		200,000
101.70.1300.1000.619.148	Services and Supplies - Household Expenses (Vet's Park)		10,000
101.70.1300.1000.619.222	Services and Supplies - Other Consultants (Vet's Park)		15,000
101.70.1300.1000.619.148	Services and Supplies - Utilities (Vet's Park)		15,000
101.70.1305.1000.610.905	Salary and Benefits - Force Labor (Historical Park)	45,000	
101.70.1300.1000.610.101	Salary and Benefits - Regular (Vet's Park)		45,000
<b>Total</b>		<b>\$ 310,000</b>	<b>\$ 310,000</b>

Comments: Budget adjustment to correct salaries vs consultant costs and an additional correction to split out the Vet's Park and Historical Park budgets.

Submitted:

Department Head/Authorized Signature

Date

Verification of

Sufficient Funds:

Auditor-Controller

Date

Approval:

Administrative Officer

Date

**Approval by Board of Supervisors**

Date

Attested:

Clerk of the Board:

Vote: \_\_\_\_\_ Yes \_\_\_\_\_ No

**AUDITOR USE ONLY**

Budget Adjustment No: \_\_\_\_\_

Date Batch Input Completed: \_\_\_\_\_

By: \_\_\_\_\_

**COUNTY OF SAN BENITO  
BUDGET ADJUSTMENT/TRANSFER**

Please Indicate Type:

Fiscal Year: 19/20

Department: Non-Department

Org Key: 101.15.1015.1000

☐

**Appropriation/Est. Revenue Increase**

(Requires 4/5 Board of Supervisors Approval)

☐

**Contingency Transfer**

(Requires 4/5 Board of Supervisors Approval)

☒

**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)

LOGOS #	Description	Exp. Decrease/ Rev. Increase	Exp. Increase Rev. Decrease
101.15.1015.1000.640.504	Transfers Out - Regular (Non-Department)	466,000	
101.15.1015.1000.619.134	Services and Supplies - Software License (Non-Department)		102,000
101.15.1015.1000.619.136	Services and Supplies - Software Support (Non-Department)		44,000
101.15.1015.1000.619.222	Services and Supplies - Other Consultants (Non-Department)		320,000
300.70.3500.1304.590.001	Transfer In - Interfund Transfer In (Capital Outlay)		146,000
300.70.3500.1304.619.142	Services and Supplies - Computer Hardware (Capital Outlay)	146,000	
300.70.3500.1302.590.001	Transfer In - Interfund Transfer In (Capital Outlay)		320,000
300.70.3500.1302.650.601	Fixed Assets - Building Improvements	320,000	
<b>Total</b>		<b>\$ 932,000</b>	<b>\$ 932,000</b>

Comments: Administrative correction to reallocate expenditures to the correct budget division for OpenGov software purchase and Facilities/Safety Master Plan. Both contracts were previously approved by the Board of Supervisors.

Submitted:

Department Head/Authorized Signature

Date

Verification of

Sufficient Funds:

Auditor-Controller

Date

Approval:

Administrative Officer

Date

**Approval by Board of Supervisors**

Date

Attested:

Clerk of the Board:

Vote: \_\_\_\_\_ Yes \_\_\_\_\_ No

**AUDITOR USE ONLY**

Budget Adjustment No: \_\_\_\_\_

Date Batch Input Completed: \_\_\_\_\_

By: \_\_\_\_\_



**COUNTY OF SAN BENITO  
BUDGET ADJUSTMENT/TRANSFER**

Please Indicate Type:

Fiscal Year: 19/20  
Department: RMA (Land Development Projects)  
Org Key: 101.65.1285.1000

- ☒ **Appropriation/Est. Revenue Increase**  
(Requires 4/5 Board of Supervisors Approval)  
☐ **Contingency Transfer**  
(Requires 4/5 Board of Supervisors Approval)  
☐ **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)

LOGOS #	Description	Exp. Decrease/ Rev. Increase	Exp. Increase Rev. Decrease
101.65.1285.1000.564.600	Charges for Services - Local Agency	505,000	
101.65.1285.1000.619.222	Other Consultants		505,000
<b>Total</b>		<b>\$ 505,000</b>	<b>\$ 505,000</b>

Comments: Adjustment for increased services related to land development projects that were unexpected at the beginning of the fiscal year. Land development projects are offset by developer fees.

Submitted: \_\_\_\_\_  
Department Head/Authorized Signature  
Verification of Sufficient Funds: *Leann Hake* Date 5/8/2020  
Auditor-Controller  
Approval: *A. P. St.* Date 5/8/2020  
Administrative Officer

**Approval by Board of Supervisors**  
Attested: \_\_\_\_\_ Date \_\_\_\_\_  
Clerk of the Board: \_\_\_\_\_ Vote: \_\_\_\_\_ Yes \_\_\_\_\_ No

<b>AUDITOR USE ONLY</b>	
Budget Adjustment No: _____	
Date Batch Input Completed: _____	By: _____

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<b>Fiscal Year:</b>	19/20
<b>Department:</b>	Risk Management
<b>Org Key:</b>	101.20.1140.1000

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(Requires Auditor Approval)

Comments: General legal costs are proposed to be moved to County Counsel's operating budget as they monitor and make payments on these transactions. Appropriations are for general litigation or outside Counsel costs.

Date \_\_\_\_\_

Sean Goetz  
Auditor-Controller

Date \_\_\_\_\_

  
Administrative Officer

Date \_\_\_\_\_

Date \_\_\_\_\_

Clerk of the Board: \_\_\_\_\_

Vote: \_\_\_\_\_ Yes \_\_\_\_\_ No

## By: \_\_\_\_\_

**COUNTY OF SAN BENITO  
BUDGET ADJUSTMENT/TRANSFER**

Please Indicate Type:

Fiscal Year: FY2019-2020  
Department: Health & Human Services  
Org Key: Public Health - 2390

- ☐ Appropriation/Est. Revenue Increase  
(Requires 4/5 Board of Supervisors Approval)  
☒ Contingency Transfer  
(Requires 4/5 Board of Supervisors Approval)  
☐ 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)

LOGOS #	Description	Exp. Decrease/ Rev. Increase	Exp. Increase Rev. Decrease
224.80.2390.1000.619.164	Services and Supplies Office Supplies		8,000
224.80.2390.1000.619.142	Services and Supplies Computer Hardware		5,000
224.80.2390.1000.630.110	Services and Supplies Office Equipment under \$5,000		5,000
224.80.2390.1000.630.110	Other Charges Program Supplies		10,000
224.80.2390.1000.999.901	Contingencies	28,000	
Total		\$ 28,000	\$ 28,000

Comments: Expense increase in several line items due the COVID-19 Emergency.

Submitted: [Signature] 5/5/20  
Department Head/Authorized Signature Date  
Verification of Sufficient Funds: [Signature] 5/5/2020  
Auditor-Controller Date  
Approval: [Signature] 5/7/2020  
Administrative Officer Date

Approval by Board of Supervisors

Attested: \_\_\_\_\_ Date \_\_\_\_\_  
Clerk of the Board: \_\_\_\_\_ Vote: \_\_\_\_\_ Yes \_\_\_\_\_ No

**AUDITOR USE ONLY**

Budget Adjustment No: \_\_\_\_\_  
Date Batch Input Completed: \_\_\_\_\_ By: \_\_\_\_\_



**Please Indicate Type:**

**Org Key:** Public Health - 2390

(Requires Auditor Approval)

By:

**COUNTY OF SAN BENITO  
BUDGET ADJUSTMENT/TRANSFER**

Please Indicate Type:

Fiscal Year: FY 2019-2020  
Department: TREASURER/TAX COLLECTOR/PA  
Org Key: 1155/1160

- ☐ **Appropriation/Est. Revenue Increase**  
(Requires 4/5 Board of Supervisors Approval)  
☐ **Contingency Transfer**  
(Requires 4/5 Board of Supervisors Approval)  
☒ **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)

LOGOS #	Description	Exp. Decrease/ Rev. Increase	Exp. Increase Rev. Decrease
101.30.1155.1000.619.222	OTHER CONSULTANTS	\$ 3,500.00	
101.30.1160.1000.650.304	<del>FIXED ASSETS</del> <i>Computer Hardware</i>		\$ 3,500.00
<i>619.142</i> TO TRANSFER MONIES FOR THE PURCHASE OF 3 NEW COMPUTER SYSTEMS			
101.30.1160.1000.610.101	SALARIES	\$ 55,000.00	
101.30.1155.1000.610.101	SALARIES		\$ 55,000.00
101.30.1160.1000.619.170	POSTAGE & DELIVERY	25,000.00	
101.30.1155.1000.619.222	OTHER CONSULTANTS		25,000.00
TO RE-ALIGN EXPENDITURES BETWEEN DEPARTMENTS			
<b>Total</b>		<b>\$ 83,500.00</b>	<b>\$ 83,500.00</b>

Comments: TRANSFER FUNDING FROM THE TREASURER TO THE TAX COLLECTOR BUDGET.  
BUDGET REALIGNMENT BETWEEN OFFICES.

Submitted:

*M. Casler*  
Department Head/Authorized Signature

*1/29/2020*  
Date

Verification of  
Sufficient Funds:

*Sean Goble*  
Auditor-Controller

*5/8/2020*  
Date

Approval:

*A. Kats*  
Administrative Officer

*5/8/2020*  
Date

Approval by Board of Supervisors

Date

Attested:

Clerk of the Board:

Vote: \_\_\_\_\_ Yes \_\_\_\_\_ No

**AUDITOR USE ONLY**

Budget Adjustment No: \_\_\_\_\_

Date Batch Input Completed: \_\_\_\_\_

By: \_\_\_\_\_