

For
Controller's
Office
Use
Only

Agency/Department Name: Public Health									
Line #	Description	Fund	Superior Fd Cntr	Cost Center	G.L. Account	Project Definition/ Employee Class	Amount (in Dollars)		
							Revenue	Expenditure	
1	Federal - Other Funds	0425	0410	9853	4580200		160,146.00		
2	Transfer Out	0425	0410	9853	5610100			160,146.00	
3	Transfer In	0001	0410	2825	4920100		160,146.00		
4	Medical Dental and Lab	0001	0410	2825	5240100			30,609.00	
5	Office Expense	0001	0410	2825	5250100			394.00	
6	Contracts	0001	0410	2825	5255500			127,767.00	
7	Business Travel	0001	0410	2825	5285800			1,376.00	
8									
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21									
22									
23	Transfer from trust fund (Fund # _____)								
24	Transfer from fund balance (Fund # _____)								
25	Others - Describe:								
26									
27	Total forwarded from other pages (Page 2)							-	-

TOTAL **320,292.00** **320,292.00**

Recognize new expenditure/revenue (ongoing)
 Recognize new expenditure/revenue (one-time)
 Re-appropriate prior year unspent expenditures (one-time)
 Others
Brief Description: Increase revenue/expenditures \$160,146 for Pan Flu in FY09 and \$338,055 for ODMS in FY10

SAP Document numbers	Prepared By :
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Entered to SAP by: _____	Telephone: 885-3884
Date entered : _____	Clerk of the Board
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