

COUNTY OF SANTA CLARA
 REQUEST FOR APPROPRIATION MODIFICATION
 FISCAL YEAR = 2010

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	State - Other Grants	0001	0410	2906	4580200		(405,603.00)	
2	Temporary Employee	0001	0410	2906	5101100			25,608.00
3	Budget Salary Reduction	0001	0410	2906	5107100			(87,496.00)
4	Education Exp - Other	0001	0410	2906	5250900			(16,750.00)
5	Workshops, Conf & Seminars	0001	0410	2906	5251000			(5,943.00)
6	Prof & Sepcialized Svcs	0001	0410	2906	5255100			(243,956.00)
7	Advertising	0001	0410	2906	5255150			(10,375.00)
8	PC Hardware	0001	0410	2906	5275200			(1,125.00)
9	Equipment	0001	0410	2906	5275500			(10,000.00)
10	Mileage	0001	0410	2906	5285300			(2,000.00)
11	Svc & Supplies - Other	0001	0410	2906	5350400			27,766.00
12	Budget Salary Reduction	0001	0410	2914	5107100			(81,332.00)
13								
14								
15								
16								
17								
18								
19								
20								
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 (405,603.00) (405,603.00)

- Recognize new expenditure/revenue (ongoing)
 - Recognize new expenditure/revenue (one-time)
 - Re-appropriate prior year unspent expenditures (one-time)
 - Others
- Brief Description: Reduced funding in Public Health's STEPS program

SAP Document numbers		Prepared By :	
FM _____		Name (print): Tuan Nguyen	
Entered to SAP by: _____		Telephone: 885-3884	
Date entered : _____			
Transmittal # 060		Clerk of the Board	
BU410T008		Approved by the Board of Supervisors	
		Clerk of the Board By: _____ Date _____	