

COUNTY OF MENDOCINO

REQUEST FOR APPROPRIATION, CANCELLATION OR REVISION OF FUNDS

Dept./Office: BHRS

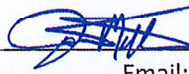
Date 07/10/2024

To County Auditor-Controller:

The Following request is deemed necessary. Please report the available balances to the County Executive Officer.

Fund	Org/BU	Object (+Project)	Object Description	AMOUNT	I/D	AUDITOR BALANCE
4450	WZ	86-2189	PROF&SPEC SVCS	\$ 687,753.00	I	
4450	WZ	86-2239	SPEC DEPT EXP	\$ 51,075.00	I	
4450	WZ	82-7801	GRANT REVENUE	\$ 738,828.00	I	

This extension to the MHSSA grant was still in development when the FY2425 budgets were submitted. Increase in appropriation to MH 86-2189 & MH 86-2239 to cover grant expenses. Source of funds is the MHSSA grant award

JUSTIFICATION: As stated above or attached memo. DEPARTMENT HEAD By 

Prepared by: Martin Kaye

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Email: kayem@mendocinocounty.gov

TO COUNTY EXECUTIVE OFFICER:

- ☒ Sufficient balances remain in the accounts indicated to effect transfer as requested.
☐ Insufficient balances are available to meet the above request within departmental budget.
 Requires transfer of \$ _____

REMARKS:

New grant funding. Increase in revenue to offset expense.

No. _____ Date 7/11/24 Acting

AUDITOR-CONTROLLER BY 

COUNTY EXECUTIVE OFFICER:

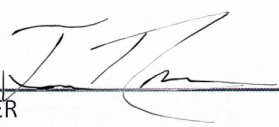
☐ RECOMMENDATION

☒ APPROVAL

☐ DENIED

COMMENTS:

Date 7/12/2024

COUNTY EXECUTIVE OFFICER 

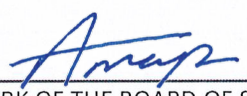
ACTION OF BOARD OF SUPERVISORS: ☒ APPROVED AS REQUESTED

☐ APPROVED AS REVISED

☐ OTHER

REMARKS:

Date 09/10/2024

DEPUTY CLERK OF THE BOARD OF SUPERVISORS 

JE NO. _____

Date _____

By: _____