

PY

CONTRA COSTA COUNTY  
ESTIMATED REVENUE ADJUSTMENT/  
ALLOCATION ADJUSTMENT  
T/C 24

AUDITOR-CONTROLLER  
2019 JUL 23 P 3:18

AUDITOR-CONTROLLER USE ONLY  
FINAL APPROVAL NEEDED BY:

- BOARD OF SUPERVISORS
- COUNTY ADMINISTRATOR
- AUDITOR-CONTROLLER

ACCOUNT CODING		DEPARTMENT : 0583, WORKFORCE DEVELOPMENT BOARD			
ORGANIZATION	REVENUE ACCOUNT	REVENUE ACCOUNT DESCRIPTION	INCREASE		<DECREASE>
5666	9555	FED AID EMPLOY & TRAINING	775,000	00	
TOTALS			775,000	00	0 00

APPROVED

AUDITOR-CONTROLLER:

BY: [Signature] DATE 7/24/19

COUNTY ADMINISTRATOR:

BY: [Signature] DATE 8/1/19

BOARD OF SUPERVISORS:

YES:

NO:

BY: \_\_\_\_\_ DATE \_\_\_\_\_

EXPLANATION OF REQUEST:

To increase Revenue budget in FY 2018-19 by \$775,000.00 due to additional EDD Slingshot-Regional Plan Implementation allocation.

[Signature]

EHSD  
CFO

7/23/19

SIGNATURE

TITLE

DATE

REVENUE ADJ.

RAOO

5105

JOURNAL NO.

PY

AUDITOR-CONTROLLER

AUDITOR-CONTROLLER USE ONLY

CONTRA COSTA COUNTY  
APPROPRIATION ADJUSTMENT 7/19 JUL 23 P 1:  
T/C 27

FINAL APPROVAL NEEDED BY:

- BOARD OF SUPERVISORS
- COUNTY ADMINISTRATOR
- AUDITOR CONTROLLER

ACCOUNT CODING		DEPARTMENT : 0583, WORKFORCE DEVELOPMENT BOARD					
ORGANIZATION	EXPENDITURE SUB-ACCOUNT	EXPENDITURE ACCOUNT DESCRIPTION	<DECREASE>			INCREASE	
5619	1011	PERMANENT SALARIES				33,652	00
5619	1015	DEFERRED COMP CTY CONTRIB				793	00
5619	1042	FICA				2,574	00
5619	1044	RETIREMENT EXPENSE				10,381	00
5619	1060	EMPLOYEE GROUP INSURANCE				3,848	00
5619	1063	UNEMPLOYMENT INSURANCE				17	00
5619	1070	WORKERS COMPENSATION INS				1,713	00
5619	1081	LABOR RECEIVED/PROVIDED		52,978	00		
5666	1081	LABOR RECEIVED/PROVIDED				52,978	00
5666	2310	NON CNTY PROF SPCLZD SVC				650,946	00
5619	2262	BLDG OCCUPANCY COSTS				15,279	00
5619	2315	DATA PROCESSING SERVICE				1,725	00
5619	2328	ADMIN SERVICES				4,072	00
5666	2477	ED SUPPLIES AND COURSES				50,000	00
5619	5022	INTRAFUND-TRANS-SERVICES		21,076	00		
5666	5022	INTRAFUND-TRANS-SERVICES				21,076	00
TOTALS				74,054	00	849,054	00

APPROVED

AUDITOR-CONTROLLER:  
BY: [Signature] DATE 7/24/19

COUNTY ADMINISTRATOR:  
BY: [Signature] DATE 8/1/19

BOARD OF SUPERVISORS:

YES:

NO:

BY: \_\_\_\_\_ DATE \_\_\_\_\_

EXPLANATION OF REQUEST

To increase salaries and benefits, contracts and operating expenditures by \$775,000.00 for the WIOA Slingshot-Regional Plan Implementation allocation in FY 18-19.

[Signature] EHSO CFO 7/23/19

SIGNATURE TITLE DATE

APPROPRIATION APOO 5105

ADJ. JOURNAL NO.