

CONTRA COSTA COUNTY
ESTIMATED REVENUE ADJUSTMENT
T/C 24

Attachment A (County Appropriation Adjustments)

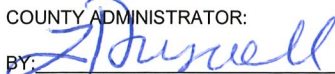
ACCOUNT CODING		BUDGET UNIT: County - various			
ORGANIZATION	REVENUE ACCOUNT	REVENUE ACCOUNT DESCRIPTION	INCREASE		<DECREASE>
0005	9010	BU 0005	2,032,935	00	
1566	9569	BU 1566	49,385,000	00	
0791	9967	BU 0791	630,000	00	
5330	9252	BU 5330	1,600,000	00	
0264	8981	BU 0264	18,000	00	
0370	8981	BU 0370	535,000	00	
4010	9879	BU 4010	3,164,811	00	
0634	8981	BU 0634	239,000	00	
0637	8981	BU 0637	6,000	00	
4841	9193	BU 4841	180,000	00	
0113	8981	BU 0113	1,883,592	00	
TOTALS			59,674,338	00	0 00

APPROVED

AUDITOR/CONTROLLER:

BY:  DATE 9/21/20

COUNTY ADMINISTRATOR:

BY:  DATE 9/9/20

BOARD OF SUPERVISORS:

YES:

NO:

BY: _____ DATE _____

EXPLANATION OF REQUEST



SIGNATURE

TITLE

DATE

REVENUE ADJ.
JOURNAL NO.

RAOO

5100

CONTRA COSTA COUNTY
ESTIMATED REVENUE ADJUSTMENT
T/C 24

ACCOUNT CODING		BUDGET UNIT: County Districts - various			
ORGANIZATION	REVENUE ACCOUNT	BUDGET UNIT: County - various REVENUE ACCOUNT DESCRIPTION	INCREASE		<DECREASE>
5278	9493	BU 0503	125,000	00	
6271	8317	BU 0861	35,000	00	
TOTALS			160,000	00	0 00

APPROVED

AUDITOR-CONTROLLER:

BY: *Agape* DATE 01/21/20

COUNTY ADMINISTRATOR:

BY: *Durcell* DATE 9/19/20

BOARD OF SUPERVISORS:

YES:

NO:

BY: _____ DATE _____

EXPLANATION OF REQUEST

[Handwritten Signature]

SIGNATURE TITLE DATE

REVENUE ADJ. JOURNAL NO. RAOO 5100

CONTRA COSTA COUNTY
APPROPRIATION ADJUSTMENT

T/C 27

AUDITOR-CONTROLLER USE ONLY

FINAL APPROVAL NEEDED BY:

BOARD OF SUPERVISORS

COUNTY ADMINISTRATOR

ACCOUNT CODING		BUDGET UNIT: County - various			
ORGANIZATION	EXPENDITURE SUB-ACCOUNT	EXPENDITURE ACCOUNT DESCRIPTION	<DECREASE>		INCREASE
1112	2479	BU 1112	68,000	00	
1112	1011				68,000 00
0036	2479	BU 0036	20,000	00	
0036	5022				20,000 00
0478	2479	BU 0478	3,000	00	
0478	3611				3,000 00
1693	2479	BU 1693	25,000	00	
1693	3580				25,000 00
1695	2479	BU 1695	35,000	00	
1697	1011	BU 1697			35,000 00
1696	2310	BU 1696	50,000	00	
1696	5022				50,000 00
1500	3611	BU 1500			1,383,126 00
1565	1011	BU 1565			450,000 00
1565	2479				4,900,000 00
1565	4952				315,000 00
1566	5022	BU 1566			43,720,000 00
0791	3501	BU 0791			630,000 00
0002	2479	BU 0002	100	00	
0002	3611				100 00
4280	5022	BU 4280	1,070,000	00	
4280	2479				1,070,000 00
1070	1011	BU 1070	1,400,000	00	
1070	2479		1,050,000	00	
1070	5011				2,450,000 00
0356	3580	BU 0356			25,164 00
1300	2479	BU 1300	110,000	00	
1300	5022				110,000 00
1000	2479	BU 1000	1,200	00	
1000	4951				100 00
1000	5022				1,100 00
4110	4770	BU 4110	213,100	00	
4110	2479				100,000 00
4110	4190				2,100 00
4110	4308				111,000 00
TOTALS			4,045,400	00	55,468,690 00

APPROVED

EXPLANATION OF REQUEST

AUDITOR-CONTROLLER:

BY: [Signature] DATE 8/21/20

COUNTY ADMINISTRATOR:

BY: [Signature] DATE 9/19/20

BOARD OF SUPERVISORS:

YES:

NO:

[Signature]

SIGNATURE

TITLE

DATE

APPROPRIATION

APOO

5100

ADJ. JOURNAL NO.

BY: _____ DATE _____

CONTRA COSTA COUNTY
APPROPRIATION ADJUSTMENT

T/C 27

FINAL APPROVAL NEEDED BY:
 BOARD OF SUPERVISORS
 COUNTY ADMINISTRATOR

ACCOUNT CODING		BUDGET UNIT: County - various			
ORGANIZATION	EXPENDITURE SUB-ACCOUNT	EXPENDITURE ACCOUNT DESCRIPTION	<DECREASE>		INCREASE
4401	4140	BU 4401	455,536	00	
4433	4113	BU 4433			93,287 00
4419	4227	BU 4419			53,769 00
4421	4304	BU 4421			212,631 00
4402	5022	BU 4402			95,849 00
0015	1011	BU 0015	42,000	00	
0015	2479				40,000 00
0015	5011				2,000 00
1600	1011	BU 1600	500,000	00	
1600	5022				85,000 00
0019	2310	BU 0019			415,000 00
1700	2479	BU 1700	10,000	00	
1700	5022				10,000 00
5101	2479	BU 5101	4,820,000	00	
5101	5022				4,820,000 00
5330	1011	BU 5330	1,070,000	00	
5330	2479	BU 5330	400,000	00	
5330	3611				2,735,000 00
5330	5022				2,900,000 00
5450	1011	BU 5450	6,915,000	00	
5450	3611				4,350,000 00
0508	5011	BU 0508	46,000	00	
0508	2479				30,000 00
0508	3611				16,000 00
5561	5011	BU 5561	87,000	00	
5561	2479				87,000 00
0585	2479	BU 0585	50,000	00	
0585	5011				50,000 00
0586	2479	BU 0586	8,500	00	
0586	3611				8,000 00
0586	5011				500 00
TOTALS			14,404,036	00	16,004,036 00

APPROVED

AUDITOR-CONTROLLER:

BY: *C. G. [Signature]* DATE 8/21/20

COUNTY ADMINISTRATOR:

BY: *[Signature]* DATE 9/19/20

BOARD OF SUPERVISORS:

YES:

NO:

BY: _____ DATE _____

EXPLANATION OF REQUEST

[Signature]

SIGNATURE TITLE DATE

APPROPRIATION APOO 5100

ADJ. JOURNAL NO.

CONTRA COSTA COUNTY
 APPROPRIATION ADJUSTMENT

T/C 27

FINAL APPROVAL NEEDED BY:

BOARD OF SUPERVISORS

COUNTY ADMINISTRATOR

ACCOUNT CODING		BUDGET UNIT: County - various				
ORGANIZATION	EXPENDITURE SUB-ACCOUNT	EXPENDITURE ACCOUNT DESCRIPTION	<DECREASE>		INCREASE	
2123	3611	BU 2123	35,000	00		
2123	2479				35000	00
0238	2479	BU 0238	10,000	00		
0239	2479	BU 0239			10,000	00
0246	2479	BU 0246	5,000	00		
0246	3611				5,000	00
2561	2479	BU 2561	60,000	00		
2561	5011				60,000	00
0264	3611	BU 0264			18,000	00
2350	2479	BU 2350	3,000	00		
2350	5011				3,000	00
0355	1011	BU 0355	6,000	00		
0355	5022				6,000	00
2500	4948	BU 2500	338,870	00		
2500	4951		25,502	00		
2500	4952		15,000	00		
2500	4953		162,531	00		
2500	4954		282,422	00		
2500	4955		350,750	00		
2500	4956		2,000	00		
2500	3611		179,751	00		
2500	1011				914,000	00
2500	2479				50,000	00
2500	5011				800,000	00
0271	2479	BU 0271	170,000	00		
0271	5011				170,000	00
0270	2479	BU 0270	50,000	00		
0270	5011		42,748	00		
0274	5011	BU 0274			92,748	00
2591	1011	BU 2591	436,474	00		
2591	5022				29,000	00
2591	3611				300	00
TOTALS			2,175,048	00	2,193,048	00

APPROVED

AUDITOR-CONTROLLER:

BY:  DATE 8/21/20

COUNTY ADMINISTRATOR:

BY:  DATE 9/19/20

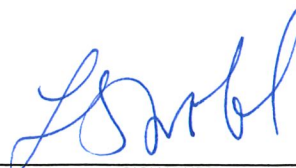
BOARD OF SUPERVISORS:

YES:

NO:

BY: _____ DATE _____

EXPLANATION OF REQUEST



SIGNATURE TITLE DATE

APPROPRIATION APOO 5100

ADJ. JOURNAL NO.

CONTRA COSTA COUNTY
APPROPRIATION ADJUSTMENT

T/C 27

AUDITOR-CONTROLLER USE ONLY


FINAL APPROVAL NEEDED BY:

BOARD OF SUPERVISORS

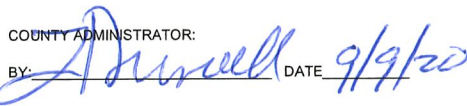
COUNTY ADMINISTRATOR

ACCOUNT CODING		BUDGET UNIT: County - various			
ORGANIZATION	EXPENDITURE SUB-ACCOUNT	EXPENDITURE ACCOUNT DESCRIPTION	<DECREASE>		INCREASE
2590	1011	BU 2590	1,232,205	00	
2590	2479				1,100,000 00
2590	4948		650	00	
2590	4274				50 00
2590	4275				600 00
0359	1011	BU 0359			50,000 00
0359	2479				83,010 00
0359	3611				105 00
3620	5011	BU 3620	615,910	00	
3620	1011				243,000 00
3620	3611				372,000 00
3000	1011	BU 3000	1,949,000	00	
3000	2479				1,891,000 00
3000	3611				58,000 00
3120	1011	BU 3120	446,350	00	
3120	2479	BU 3120			436,000 00
3120	3611				10,200 00
3120	4952				150 00
3065	3611	BU 3065	195,000	00	
3065	2479				195,000 00
3305	1011	BU 3305	3,000	00	
3305	5011				3,000 00
3340	2479	BU 3340	1,000	00	
3340	3611				1,000 00
3349	2479	BU 3349	17,105	00	
3349	3611				105 00
0369	5022	BU 0369			17,000 00
2601	1011	BU 2601	1,952,991	00	
2601	5011				1,882,000 00
0114	4315	BU 0114			70,945 00
0114	4386				46 00
0285	1011	BU 0285	4,500	00	
0285	3611				4,500 00
0370	2479	BU 0370	524,000	00	
0370	3611				889,000 00
0370	5011				170,000 00
TOTALS			6,941,711	00	7,476,711 00

APPROVED

AUDITOR-CONTROLLER: 

BY: _____ DATE 8/21/20

COUNTY ADMINISTRATOR: 

BY: _____ DATE 9/9/20


BOARD OF SUPERVISORS:

YES:

NO:

BY: _____ DATE _____

EXPLANATION OF REQUEST



SIGNATURE TITLE DATE

APPROPRIATION APOO 5100

ADJ. JOURNAL NO.

CONTRA COSTA COUNTY
APPROPRIATION ADJUSTMENT

T/C 27

AUDITOR-CONTROLLER USE ONLY

FINAL APPROVAL NEEDED BY:

BOARD OF SUPERVISORS

COUNTY ADMINISTRATOR

ACCOUNT CODING		BUDGET UNIT: County - various			
ORGANIZATION	EXPENDITURE SUB-ACCOUNT	EXPENDITURE ACCOUNT DESCRIPTION	<DECREASE>		INCREASE
3601	2479	BU 3601	1,000	00	
3601	5011	BU 3601			1,000 00
1585	2479	BU 1585	3,000	00	
1585	5011				3,000 00
0591	2479	BU 0591	10	00	
0591	3611				10 00
1590	2479	BU 1590	218,800	00	
1587	2479	BU 1587			215,500 00
1587	5011				3,300 00
1597	2479	BU 1597	225,000	00	
1597	5011				225,000 00
0595	2479	BU 595	2,500	00	
0595	3611	BU 0595			2,500 00
0597	2479	BU 0597	150,000	00	
0597	5011				150,000 00
0663	5011	BU 0663	170,000	00	
0663	2479				170,000 00
1780	1011	BU 1780	456,000	00	
1780	2479				456,000 00
2800	2479	BU 2800	410,500	00	
2800	5022				145,000 00
2895	1011	BU 2895			83,000 00
2895	2479				7,500 00
2895	5022				175,000 00
0247	2479	BU 0247	457,300	00	
0247	3611				300 00
0247	5011				457,000 00
0251	2479	BU 0251	500	00	
0251	3611				500 00
2900	5022	BU 2900	103,338	00	
2900	1011				654,983 00
2900	2479				72,986 00
2900	3611				14 00
TOTALS			2,197,948	00	2,822,593 00

APPROVED

EXPLANATION OF REQUEST

AUDITOR-CONTROLLER:

BY: [Signature] DATE 9/21/20

COUNTY ADMINISTRATOR:

BY: [Signature] DATE 9/19/20

BOARD OF SUPERVISORS:

YES:

NO:

[Signature]

SIGNATURE TITLE DATE

APPROPRIATION APOO 5100

ADJ. JOURNAL NO.

BY: _____ DATE _____

CONTRA COSTA COUNTY
APPROPRIATION ADJUSTMENT

T/C 27

AUDITOR-CONTROLLER USE ONLY

FINAL APPROVAL NEEDED BY:

BOARD OF SUPERVISORS

COUNTY ADMINISTRATOR

ACCOUNT CODING		BUDGET UNIT: County - various			
ORGANIZATION	EXPENDITURE SUB-ACCOUNT	EXPENDITURE ACCOUNT DESCRIPTION	<DECREASE>		INCREASE
0020	1011	BU 0020	128,000	00	
0020	2479				128000 00
4282	3611	BU 4282	1,400,000	00	
4282	2479				1,400,000 00
4309	2479	BU 4309	20,000	00	
4309	5011				20,000 00
4010	1011	BU 4010	4,549,663	00	
4010	4953		95,443	00	
4010	4956				95,443 00
4010	5022				6,629,000 00
4010	2479				1,238,000 00
4210	1011	BU 4210	128,000	00	
4210	2479		200,526	00	
4210	5022				176,000 00
0330	2479	BU 0330	8,000	00	
0330	5011	BU 0330			8,000 00
4730	2479	BU 4730	50,000	00	
4730	5022				50,000 00
0634	5011	BU 0634			239,000 00
0637	5011	BU 0637			6,000 00
0641	5011	BU 0641	100	00	
0641	3611				100 00
0645	5011	BU 0645	100	00	
0645	3611				100 00
4500	1011	BU 4500	2,300,000	00	
4500	5022	BU 4500			2,300,000 00
0672	2479	BU 0672	1,300,000	00	
0672	5011				900,000 00
0676	2479	BU 0676	400,000	00	
0676	3611				800,000 00
0680	5011		1,000	00	
0680	3611				1,000 00
0682	5011	BU 0682	130,000	00	
0682	2479				130,000 00
TOTALS			10,710,832	00	14,120,643 00

APPROVED

EXPLANATION OF REQUEST

AUDITOR-CONTROLLER:

BY:  DATE 10/1/20

COUNTY ADMINISTRATOR:

BY:  DATE 9/9/20

BOARD OF SUPERVISORS:

YES:

NO:



SIGNATURE

TITLE

DATE

APPROPRIATION

APOO

5100

ADJ. JOURNAL NO.

BY: _____ DATE _____

CONTRA COSTA COUNTY
APPROPRIATION ADJUSTMENT

T/C 27

AUDITOR-CONTROLLER USE ONLY

FINAL APPROVAL NEEDED BY:

- BOARD OF SUPERVISORS
- COUNTY ADMINISTRATOR

ACCOUNT CODING		BUDGET UNIT: County - various			
ORGANIZATION	EXPENDITURE SUB-ACCOUNT	EXPENDITURE ACCOUNT DESCRIPTION	<DECREASE>		INCREASE
4841	1011	BU 4841	221,000	00	
4841	5011		22,000	00	
4841	2479				156,000 00
4841	3611				423,000 00
4853	2479	BU 4853	156,000	00	
4853	4661		84,700	00	
4853	4654				6,200 00
4853	4657				27,100 00
4853	4955				51,400 00
0113	4278	BU 0113			1,883,592 00
3702	2479	BU 3702	140,000	00	
3702	3611				135,000 00
3702	5011				5,000 00
0579	1011	BU 0579	4,600	00	
0579	3611				600 00
0579	5011				4,000 00
TOTALS			628,300	00	2,691,892 00

APPROVED

AUDITOR-CONTROLLER:

BY: [Signature] DATE 0/21/20

COUNTY ADMINISTRATOR:

BY: [Signature] DATE 9/19/20

BOARD OF SUPERVISORS:

YES:

NO:

BY: _____ DATE _____

EXPLANATION OF REQUEST

[Signature]

SIGNATURE TITLE DATE

APPROPRIATION APOO 5100
ADJ. JOURNAL NO.

CONTRA COSTA COUNTY
APPROPRIATION ADJUSTMENT

T/C 27

FINAL APPROVAL NEEDED BY:

BOARD OF SUPERVISORS

COUNTY ADMINISTRATOR

ACCOUNT CODING		BUDGET UNIT: County - various				
ORGANIZATION	EXPENDITURE SUB-ACCOUNT	EXPENDITURE ACCOUNT DESCRIPTION	<DECREASE>		INCREASE	
2591	1011	BU 0277	14,000	00		
2500	5011	BU 0255	88,500	00		
2500	2100				102,500	00
2578	2479	BU 0503			125,000	00
2353	4951	BU 0043	40,000	00		
2353	4953				40,000	00
4010	2479	BU 0079	10	00		
4010	1011				10	00
4110	5022	BU 0085	113,500	00		
4110	2289		1,000	00		
4110	4470		98,600	00		
4110	4770				213,100	00
2900	1011	BU 0243	32,000	00		
2900	2479				31,000	00
2916	4310				1,000	00
2575	3560	BU 0300	24,000	00		
2590	2479				24,000	00
TOTALS			411,610	00	536,610	00

APPROVED

AUDITOR-CONTROLLER:

BY: DATE 01/21/20

COUNTY ADMINISTRATOR:

BY: DATE 9/19/20

BOARD OF SUPERVISORS:

YES:

NO:

BY: _____ DATE _____

EXPLANATION OF REQUEST

SIGNATURE TITLE DATE

APPROPRIATION

APOO

5100

ADJ. JOURNAL NO.

CONTRA COSTA COUNTY
APPROPRIATION ADJUSTMENT

T/C 27

FINAL APPROVAL NEEDED BY:

BOARD OF SUPERVISORS

COUNTY ADMINISTRATOR

ACCOUNT CODING		BUDGET UNIT: County - various				
ORGANIZATION	EXPENDITURE SUB-ACCOUNT	EXPENDITURE ACCOUNT DESCRIPTION	<DECREASE>		INCREASE	
3000	1011	BU 0308	57,000	00		
3000	2479				57,000	00
3120	1011	BU 0309	5,000	00		
3120	2479				5,000	00
5561	5011	BU 0581	27,000	00		
5561	2479				27,000	00
1401	1011	BU 0588	220,000	00		
1401	2479				220,000	00
6050	3611	BU 0471	410,000	00		
6050	2479				410,000	00
0505	3611	BU 0505	8,000	00		
0505	2310				8,000	00
4282	2479	BU 0064	900,000	00		
4282	3622				900,000	00
TOTALS			1,627,000	00	1,627,000	00

APPROVED

EXPLANATION OF REQUEST

AUDITOR-CONTROLLER:

BY:  DATE 8/21/20

COUNTY ADMINISTRATOR:

BY:  DATE 9/19/20

BOARD OF SUPERVISORS:

YES:

NO:

BY: _____ DATE _____



SIGNATURE TITLE DATE

APPROPRIATION

APOO

5100

ADJ. JOURNAL NO.

CONTRA COSTA COUNTY
APPROPRIATION ADJUSTMENT

T/C 27

FINAL APPROVAL NEEDED BY:

BOARD OF SUPERVISORS

COUNTY ADMINISTRATOR

ACCOUNT CODING		BUDGET UNIT: County - various			
ORGANIZATION	EXPENDITURE SUB-ACCOUNT	EXPENDITURE ACCOUNT DESCRIPTION	<DECREASE>		INCREASE
5750	5011	BU 0450	79,510	00	
5700	2321	BU 0301			40,000 00
5750	4954	BU 0450			13,000 00
5750	2479				17,000 00
5750	1011				10 00
0451	2310	BU 0451			9,500 00
5900	2320	BU 0466	10	00	
5900	5011				10 00
4841	2479	BU 0841	700	00	
4841	5011		200	00	
4841	3611				900 00
4853	4951	BU 0843	800,000	00	
4853	3560				800,000 00
6971	3505	BU 0853	11,875,000	00	
6200	1011	BU 0540	7,850,000	00	
6911	4954				175,000 00
6200	2889				19,550,000 00
TOTALS			20,605,420	00	20,605,420 00

APPROVED

EXPLANATION OF REQUEST

AUDITOR-CONTROLLER:

BY:  DATE 8/21/20

COUNTY ADMINISTRATOR:

BY:  DATE 9/19/20

BOARD OF SUPERVISORS:

YES:

NO:



SIGNATURE TITLE DATE

APPROPRIATION APOO 5100

ADJ. JOURNAL NO.

BY: _____ DATE _____

CONTRA COSTA COUNTY
APPROPRIATION ADJUSTMENT

T/C 27

Attachment A - COUNTY ADMINISTRATOR USE ONLY
FINAL APPROVAL NEEDED BY:

- BOARD OF SUPERVISORS
 COUNTY ADMINISTRATOR

ACCOUNT CODING		BUDGET UNIT: County - various			
ORGANIZATION	EXPENDITURE SUB-ACCOUNT	EXPENDITURE ACCOUNT DESCRIPTION	<DECREASE>		INCREASE
6100	2861	BU 0860	150,100	00	
6100	1011				150,000 00
6177	2866				100 00
6271	2861	BU 0861			35,000 00
TOTALS			150,100	00	185,100 00

APPROVED

EXPLANATION OF REQUEST

AUDITOR-CONTROLLER:

BY:  DATE 8/11/20

COUNTY ADMINISTRATOR:

BY:  DATE 9/15/20

BOARD OF SUPERVISORS:

YES:

NO:

BY: _____ DATE _____



SIGNATURE TITLE DATE

APPROPRIATION APOO 5100

ADJ. JOURNAL NO.

CONTRA COSTA COUNTY
APPROPRIATION ADJUSTMENT

T/C 27

- FINAL APPROVAL NEEDED BY:
- BOARD OF SUPERVISORS
 - COUNTY ADMINISTRATOR

ACCOUNT CODING		BUDGET UNIT: County - various			
ORGANIZATION	EXPENDITURE SUB-ACCOUNT	EXPENDITURE ACCOUNT DESCRIPTION	<DECREASE>		INCREASE
2578	2479	BU 0300	125,000	00	
5278	2479	BU 0503			125,000 00
TOTALS			125,000	00	125,000 00

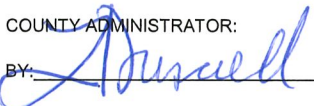
APPROVED

EXPLANATION OF REQUEST

AUDITOR-CONTROLLER:

BY:  DATE 8/21/20

COUNTY ADMINISTRATOR:

BY:  DATE 9/15/20

BOARD OF SUPERVISORS:

YES:

NO:



BY: _____ DATE _____

SIGNATURE TITLE DATE

APPROPRIATION APOO 5100

ADJ. JOURNAL NO.

CONTRA COSTA COUNTY
 APPROPRIATION ADJUSTMENT
 T/C 27


AUDITOR CONTROLLER USE ONLY


Final Approval Needed By:

- Board Of Supervisors
 County Administrator

AUDITOR-CONTROLLER
 AUG 10 9 3 58 P

ACCOUNT CODING		BUDGET UNIT: HEALTH SERVICES DEPARTMENT - 0465		
ORG'N.	EXPENSE SUB-ACCT.	EXPENDITURE ACCOUNT DESCRIPTION	< DECREASE >	INCREASE
SUBSIDY 100300-0465				
0465	3570	Contribution to Enterprise Fund - MH 0467		11,490,144 .00
0465	3570	Contribution to Enterprise Fund - Conservatorship 0451		30,910 .00
0465	3570	Contribution to Enterprise Fund - AODS 0466		425,035 .00
0465	3570	Contribution to Enterprise Fund - Detention 0301	6,796,279 .00	
0465	3570	Contribution to Enterprise Fund - PH 0450	3,037,187 .00	
0465	3570	Contribution to Enterprise Fund - EH 0452	706,195 .00	
0465	3570	Contribution to Enterprise Fund - Pub Adm 0454	157,760 .00	
0465	3570	Contribution to Enterprise Fund - CCS 0460	2,166,464 .00	
0465	3570	Contribution to Enterprise Fund - Homeless 0463		787,171 .00
5885	2479	Other Special Dpmtal Exp		130,625 .00
5963	4951	Office Equip & Furniture		130,625 .00
			12,863,885 .00	12,994,510 .00

Approved
 AUDITOR - CONTROLLER
 By:  Date: 8/24/20

COUNTY ADMINISTRATOR
 By:  Date: 8/11/20

BOARD OF SUPERVISORS

YES:


NO:

By: _____ Date: _____

EXPLANATION OF REQUEST

To adjust Fiscal Year-end 6/30/20 appropriation based on the most current estimates.

Revenue increase (decrease)	\$0.00
Expense increase (decrease)	(130,625.00)
Subsidy increase (decrease)	<u>(\$130,625.00)</u>

 COO/CFO
 Title Date 08/06/20

Appropriation Adj. Journal NO. **AP00 5099**


CONTRA COSTA COUNTY
 APPROPRIATION ADJUSTMENT
 T/C 27

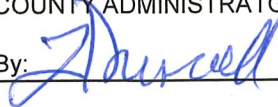
AUDITOR CONTROLLER USE ONLY

Final Approval Needed By:

- Board Of Supervisors
 County Administrator

ACCOUNT CODING		BUDGET UNIT: HEALTH SERVICES DEPARTMENT - EF1 145000-0540 page 1 of 1		
ORG'N.	EXPENSE SUB-ACCT.	EXPENDITURE ACCOUNT DESCRIPTION	< DECREASE >	INCREASE
6200	1011	PERMANENT SALARIES		5,484,815 .00
6200	1013	TEMPORARY SALARIES		2,058,819 .00
6200	1014	PERMANENT OVERTIME	2,817,750 .00	
6200	1015	DEFERRED COMP CTY CONTRB		525,585 .00
6200	1017	PERM PHYSICIANS SALARIES		1,194,844 .00
6200	1044	RETIREMENT EXPENSE	3,973,758 .00	
6200	1060	EMPLOYEE GROUP INSURANCE	4,566,984 .00	
6200	1070	WORKERS COMPENSATION INS	786,184 .00	
6200	2802	REGISTRY	1,084,105 .00	
6200	2808	COMPUTER SOFTWARE COST		810,660 .00
6200	2821	MED FEES-THER & OTHER	753,741 .00	
6200	2822	SPECIALIZED SVCS - NON-MED	1,477,613 .00	
6200	2826	MED FEES-PHYSICN-CLIN SVC		30,335 .00
6200	2834	SURGICAL SUPPLIES-GENERAL	1,538,780 .00	
6200	2838	PHARMACEUTICALS		1,457,005 .00
6200	2841	OTHER MED CARE MTL & SUPP		589,822 .00
6200	2847	EMPLOYEE WEARING APPAREL		1,322,160 .00
6200	2849	OTHR MINOR EQUIPMENT	302,159 .00	
6200	2861	MEDICAL-PURCHASED SERVICE		4,969,673 .00
6200	2866	OTHER PURCHASED SERVICES	908,787 .00	
6200	2885	TELEPHONE/TELEGRAPH	319,991 .00	
6200	2886	DUES AND SUBSCRIPTIONS	632,615 .00	
6200	2889	OTHER EXPENSES	766,000 .00	
			19,928,467 .00	18,443,718 .00

Approved
 AUDITOR CONTROLLER
 By:  Date: 8/21/20

COUNTY ADMINISTRATOR
 By:  Date: 9/1/20

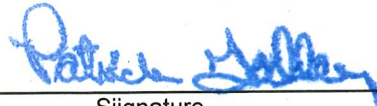
BOARD OF SUPERVISORS
 YES:
 NO:

By: _____ Date: _____

EXPLANATION OF REQUEST

To adjust estimated expenditures for fiscal year 2019/20 in both hospital units and the outpatient clinic services

Increase (Decrease) in Revenues	(1,484,749)
Increase (Decrease) in Expenditures	(1,484,749)
Increase (Decrease) in Co. Contrib.	\$ -

 Title _____ Date 08/06/20

Appropriation Adj. Journal NO. AP00 5099

CONTRA COSTA COUNTY
 APPROPRIATION ADJUSTMENT
 T/C 27


AUDITOR CONTROLLER USE ONLY

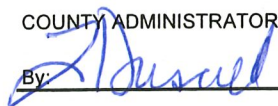
Final Approval Needed By:

- Board Of Supervisors
 County Administrator

ACCOUNT CODING		BUDGET UNIT: ENTERPRISE FUND 1 - CAPITAL (145000-0853)	Page 1 of 1	
ORG'N.	EXPENSE SUB-ACCT.	EXPENDITURE ACCOUNT DESCRIPTION	< DECREASE >	INCREASE
6971	4513	4513 - 555-Redesign Pharmacy		82,018 .00
6971	4514	4514 - 550-Update 4 Elevators		966,957 .00
6971	4515	4515 - 550-Construct Expansion		172 .00
6971	4517	4517 - 265-Repair Roof		393 .00
6971	4518	4518 - 749 - WCHC Expansion		5,894,308 .00
6971	4519	4519 - 555-Secure 5A 5B 5C HOSP	606,012 .00	
6971	4524	4524 - 550-TI Move Him & Parking		950 .00
6971	4525	4525 - 756-TI HSD 2380 Bisso B	14,000 .00	
6971	4526	4526 - 726-Tenant Improvements		5,501 .00
6971	4527	4527 - 756-Construct Data Center		113,653 .00
6971	4528	4528 - 201- Replace PLC		229 .00
6971	4529	4529 - 201 Ventilation Upgrade		11,394 .00
6971	4530	4530 - 2311 Loveridge Rd-550 Resurface PK		231,403 .00
6971	4531	4531 - 201-RPLC Liquid O2 Tanks		281,820 .00
6971	4532	4532 - IP Pharmacy install clean rm		61,651 .00
6977	4953	Autos & Trucks		943,862 .00
6977	4954	Medical & Lab Equipment	5,275,750 .00	
6979	4951	Office Furniture & Equipment		1,526,701 .00
6992	3505	Retire Other Long Term Debt	3,339 .00	
			\$5,899,101 .00	\$10,121,012 .00

APPROVED

AUDITOR - CONTROLLER
 By:  Date: 8/14/20

COUNTY ADMINISTRATOR
 By:  Date: 8/15/20

BOARD OF SUPERVISORS

YES:


NO:

By: _____ Date: _____

EXPLANATION OF REQUEST

To adjust FY19/20 Expenditure Appropriations to Current Estimates.

Revenue Increase(Decrease)	\$4,221,911
Expense Increase(Decrease)	\$4,221,911
Subsidy Increase (Decrease)	\$0


 Signature Title Date
 PATRICK GODLEY COO/CFO 07/28/20

Appropriation Adj. Journal NO. **AP00 5099**


CONTRA COSTA COUNTY
 APPROPRIATION ADJUSTMENT/
 ALLOCATION ADJUSTMENT
 T/C-27

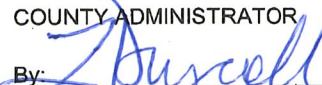
AUDITOR CONTROLLER USE ONLY

Final Approval Needed By:

- BOARD OF SUPERVISORS
- COUNTY ADMINISTRATOR
- AUDITOR-CONTROLLER

ACCOUNT CODING		DEPARTMENT: 0860:ENTERPRISE FUND 146000 (HMO ENTERPRISE)		
ORG'N.	EXPENSE SUB-ACCT.	EXPENDITURE ACCOUNT DESCRIPTION	< DECREASE >	INCREASE
6100	1011	PERMANENT SALARIES		111,209 .00
6100	2861	MEDICAL-PURCHASED SERVICES		\$52,162,275 .00
6100	3580	CONTRIB TO OTHER AGENCIES	3,766,190 .00	
			\$3,766,190 .00	\$52,273,484 .00


Approved
 AUDITOR - CONTROLLER
 By:  Date: 8/24/20

COUNTY ADMINISTRATOR
 By:  Date: 9/1/20

BOARD OF SUPERVISORS
 YES:
 NO:
 By: _____ Date: _____

EXPLANATION OF REQUEST
 To adjust FY 2019/20 EF-II appropriations to current estimates.

Increase(Decrease) in Revenues	\$48,507,294
Increase(Decrease) in Expenditures	\$48,507,294
Increase(Decrease) in Co. Subsidy	\$0

Signature:  Title: HSD CFO/COO Date: 8/6/20

Appropriation Journal No. AP00 5099

CONTRA COSTA COUNTY
 APPROPRIATION ADJUSTMENT/
 ALLOCATION ADJUSTMENT

T/C-27

AUDITOR CONTROLLER USE ONLY

Approval/Over Approval (Appropriation Adjustments)

- BOARD OF SUPERVISORS
- COUNTY ADMINISTRATOR
- AUDITOR-CONTROLLER

ACCOUNT CODING DEPARTMENT: 0861:ENTERPRISE FUND 146100 (HMO ENTERPRISE-COMMUNITY PLAN)

ORG'N.	EXPENSE SUB-ACCT.	EXPENDITURE ACCOUNT DESCRIPTION	< DECREASE >	INCREASE
6271	2861	MEDICAL PURCHASED SERVICES	182,107 00	
			\$182,107 00	\$0 00

Approved
 AUDITOR - CONTROLLER

By: [Signature] Date: 8/24/20

COUNTY ADMINISTRATOR

By: [Signature] Date: 9/9/20

BOARD OF SUPERVISORS

YES:

NO:

By: _____ Date: _____

EXPLANATION OF REQUEST

FY 2019/20 appropriation adjustment for Fund 146100:

Expenditure Increase/(Decrease)	(\$182,107)
Revenue Increase/(Decrease)	(\$182,107)
County Subsidy Increase/(Decrease)	<u>\$0</u>

Explanation:

To adjust appropriations and revenues to reflect changes to estimated FY 19/20 CCHP Community Plan premiums and expenditures.

[Signature] HSD CFO/COO 8/6/20
 Signature Title Date

Patrick Godley

Appropriation Journal No. AP00 5099


**CONTRA COSTA COUNTY
APPROPRIATION ADJUSTMENT
T/C 27**

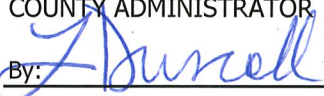
AUDITOR CONTROLLER USE ONLY

Final Approval Needed By:

- Board Of Supervisors
 County Administrator

ACCOUNT CODING		BUDGET UNIT(s): DETENTION (Dept#00301)	Page 1 of 1	
ORG'N.	EXPENSE SUB-ACCT.	EXPENDITURE ACCOUNT DESCRIPTION	< DECREASE >	INCREASE
5700	1011	Permanent Salaries	5,078,512 00	
5700	1044	Retirement Expense	3,116,275 00	
5700	2321	County Hospital Svcs		2,096,466 00
5700	2360	Insurance		7,425,912 00
5700	3611	Interfund Exp Gov/Gov		69,410 00
5700	4954	Medical & Lab Equipment	50,000 00	
5700	5011	Reimb Gov/Gov (Cnty Vehicles)		1,150 00
5700	5022	Intrafund-Trans-Services	7,522,343 00	
			15,767,130 .00	9,592,938 .00

Approved
AUDITOR - CONTROLLER
By:  Date: 8/24/20

COUNTY ADMINISTRATOR
By:  Date: 9/9/20

BOARD OF SUPERVISORS
YES:
NO:
By: _____ Date: _____

EXPLANATION OF REQUEST

This adjustment is necessary to align the budget with projected Annual Expenditures

County General Fund will INCREASE as a result of these adjustments.

Summary:

HSD DEPT#0301	<u>Expenditure Decrease</u> (\$6,174,192)	<u>Revenue Increase</u> \$622,087	<u>Cnty Cntrb. DECREASE</u> (\$6,796,279)
---------------	--	--------------------------------------	--


SIGNATURE
PATRICK GODLEY

COO/CFO

TITLE

DATE

Appropriation
Adj. Journal No.

AP00 5099

CONTRA COSTA COUNTY
 APPROPRIATION ADJUSTMENT /
 ALLOCATION ADJUSTMENT
T/C 27

FINAL APPROVAL NEEDED BY:

- BOARD OF SUPERVISORS
 COUNTY ADMINISTRATOR
 AUDITOR-CONTROLLER

ACCOUNT CODING		DEPARTMENT : Public Health 0450	Page 1 of 1	
ORGANIZATION	EXPENDITURE SUB-ACCOUNT	EXPENDITURE ACCOUNT DESCRIPTION	<DECREASE>	INCREASE
5750	1011	Perm Salaries	8,409,877	00
5750	1013	Temp Salaries		201,436 00
5750	1014	Perm Overtime		110,229 00
5750	1015	Def. Comp. CCC	135,781	00
5750	1016	Hourly Physician		72,123 00
5750	1017	Perm Physcn Sal	304,558	00
5750	1018	Prm Phys Addl Pay	9,679	00
5750	1019	Comp/ SDI Recov		447 00
5750	1042	F.I.C.A.	628,843	00
5750	1043	Ret Exp-Pre '97 Ee's	9,401	00
5750	1044	Retirement Exp	2,799,811	00
5750	1060	Employee Grp Ins	1,936,094	00
5750	1061	Retiree Group Ins		12,838 00
5750	1063	Unemployment Ins	2,861	00
5750	1070	Workers Comp	124,489	00
5750	2100	Office Expense	23,162	00
5750	2103	Postage		29,979 00
5750	2110	Communications		710,335 00
5750	2130	Sm Tools & Instr		46,484 00
5750	2131	Minor Equipment	65,772	00
5750	2132	Minor Computr Equip	81,634	00
5750	2140	Med & Lab Suppl	214,670	00
5750	2170	Household Exp	36,376	00
5750	2251	Comp Software		10,121 00
5750	2262	Occ Cost Own Bld	382,621	00
5750	2270	Maint-Equipment	20,701	00
5750	2284	Request. Maint.		301,661 00
5750	2300	Transport & Travl	52,848	00
5750	2310	Non Cnty Prof Splzrd Svcs		2,160,991 00
5750	2320	Outside Med Svc		20,031 00
5750	2326	Information Security Chg	25,639	00
5750	2328	Administrat Svc		2,088 00
5750	2335	Other Telecom Charges	27,873	00
5750	2340	Other Intrdplmntl Charges		1,374,606 00
5750	2360	Insurance		11,924,576 00
5750	2467	Training & Registrations	67,937	00
5750	2479	Othr Spc Dept Exp		958,213 00
5750	2490	Misc. Svc & Supply	23,970	00
5750	2491	Cash Shortage Reimbursement		6,599 00
5750	3611	Interfund Exp - Gov/Gov		23 00
5750	4310	157 - Remodel Restroom		168,236 00
5750	4948	Misc equip	150,000	00
5750	4954	Med & Lab Equip.	23,701	00
5750	4971	Capitalized Software	13,572	00
5750	5011	Reimbursmnts-Gov/Gov		10,361 00
5750	5022	INTRAFUND-TRANS-SERVICES	249,219	00
TOTALS			15,821,089	00
				18,121,377 00

APPROVED

AUDITOR-CONTROLLER:

BY:  DATE 8/24/20

COUNTY ADMINISTRATOR:

BY:  DATE 9/9/20

BOARD OF SUPERVISORS:

YES:

NO:

BY: _____ DATE _____

EXPLANATION OF REQUEST:

To adjust fiscal year ending 6/30/20 appropriation based on the most current estimates

Expenditure Increase (Decrease)	\$2,300,288.00
Revenue Increase (Decrease)	\$5,337,475.00
Co. Contrib. Inrease (Decrease)	(\$3,037,187.00)

 DATE 8/16/20

SIGNATURE TITLE DATE

APPROPRIATION APOO 5099
 ADJ. JOURNAL NO.

**CONTRA COSTA COUNTY
APPROPRIATION ADJUSTMENT
T/C 27**

AUDITOR CONTROLLER USE ONLY

Final Approval Needed By:

- Board Of Supervisors
 County Administrator

ACCOUNT CODING BUDGET UNIT(s): Conservator/Guardianship (0451)			Page 1 of 1	
ORG'N.	EXPENSE SUB-ACCT.	EXPENDITURE ACCOUNT DESCRIPTION	< DECREASE >	INCREASE
0451	1011	PERMANENT SALARIES	158,030 .00	
0451	1044	Retirement Expense	97,262 .00	
0451	2300	Transportation	89,100 .00	
0451	2310	Non Cnty Prof./Splcd. Svcs	13,408 .00	
0451	5011	Reimb Gov/Gov (Cnty Vehicles)		8,702 .00
0451	5022	INTRAFUND-TRANS-SERVICES	23,610 .00	
			381,410 00	8,702 00

Approved
AUDITOR - CONTROLLER
By: *[Signature]* Date: 8/24/20

COUNTY ADMINISTRATOR
By: *[Signature]* Date: 9/9/20

BOARD OF SUPERVISORS
YES:
NO:
By: _____ Date: _____

EXPLANATION OF REQUEST

This adjustment is necessary to align the budget with projected Annual Expenditures

County General Fund will INCREASE as a result of these adjustments.

Summary:

	Expenditure Decrease	Revenue Decrease	Cnty Cntrb. Increase
HSD DEPT#0451	<u>(\$372,708)</u>	<u>(\$403,618)</u>	<u>\$30,910</u>

[Signature]

COO/CFO

SIGNATURE
PATRICK GODLEY

TITLE

DATE

Appropriation
Adj. Journal No.


AP00 5099

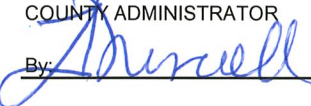
CONTRA COSTA COUNTY
APPROPRIATION ADJUSTMENT
T/C 27

Final Approval Needed By:

- Board Of Supervisors
 County Administrator

ACCOUNT CODING		BUDGET UNIT: ENVIRONMENTAL HEALTH (0452)	Page 1 of 5	
ORG'N.	EXPENSE SUB-ACCT.	EXPENDITURE ACCOUNT DESCRIPTION	< DECREASE >	INCREASE
5877	1015	DEFERRED COMP CTY CONTRB	\$ 556 .00	
5887	1015	DEFERRED COMP CTY CONTRB	\$ 576 .00	
5873	1015	DEFERRED COMP CTY CONTRB	\$ 1,553 .00	
5878	1015	DEFERRED COMP CTY CONTRB	\$ 2,297 .00	
5880	1014	PERMANENT OVERTIME	\$ 2,569 .00	
5879	1015	DEFERRED COMP CTY CONTRB	\$ 2,604 .00	
5880	1015	DEFERRED COMP CTY CONTRB	\$ 2,707 .00	
5887	1014	PERMANENT OVERTIME	\$ 2,746 .00	
5875	1014	PERMANENT OVERTIME	\$ 3,881 .00	
5885	1015	DEFERRED COMP CTY CONTRB	\$ 4,123 .00	
5876	1015	DEFERRED COMP CTY CONTRB	\$ 4,285 .00	
5889	1015	DEFERRED COMP CTY CONTRB	\$ 4,915 .00	
5877	1014	PERMANENT OVERTIME	\$ 6,493 .00	
5884	1014	PERMANENT OVERTIME	\$ 13,636 .00	
5889	1013	TEMPORARY SALARIES	\$ 17,637 .00	
5889	1014	PERMANENT OVERTIME	\$ 29,669 .00	
5879	1013	TEMPORARY SALARIES	\$ 55,444 .00	
5880	1011	PERMANENT SALARIES	\$ 73,641 .00	
5877	1011	PERMANENT SALARIES	\$ 83,196 .00	
5887	1011	PERMANENT SALARIES	\$ 112,996 .00	
5876	1011	PERMANENT SALARIES	\$ 167,696 .00	
5873	1011	PERMANENT SALARIES	\$ 197,625 .00	
5879	1011	PERMANENT SALARIES	\$ 207,386 .00	
5889	1011	PERMANENT SALARIES	\$ 230,939 .00	
5884	1011	PERMANENT SALARIES	\$ 253,658 .00	
5878	1011	PERMANENT SALARIES	\$ 254,216 .00	
5885	1011	PERMANENT SALARIES	\$ 299,571 .00	
5886	1011	PERMANENT SALARIES	\$ 393,506 .00	
5875	1011	PERMANENT SALARIES		\$ 226,972 .00
5876	1013	TEMPORARY SALARIES		\$ 123,657 .00
5873	1014	PERMANENT OVERTIME		\$ 3,278 .00
5874	1014	PERMANENT OVERTIME		\$ 131 .00
5876	1014	PERMANENT OVERTIME		\$ 5,347 .00
5878	1014	PERMANENT OVERTIME		\$ 4,337 .00
5879	1014	PERMANENT OVERTIME		\$ 8,608 .00
5885	1014	PERMANENT OVERTIME		\$ 15,641 .00
5886	1014	PERMANENT OVERTIME		\$ 29,792 .00
5875	1015	DEFERRED COMP CTY CONTRB		\$ 59 .00
5884	1015	DEFERRED COMP CTY CONTRB		\$ 1,089 .00
5886	1015	DEFERRED COMP CTY CONTRB		\$ 3,195 .00
Total			\$ 2,430,121 .00	\$ 422,106 .00

Approved
AUDITOR - CONTROLLER,
By:  Date: 01/24/20

COUNTY ADMINISTRATOR
By:  Date: 9/9/20

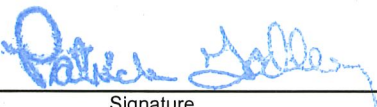
BOARD OF SUPERVISORS

YES:
NO:

By: _____ Date: _____

EXPLANATION OF REQUEST

Revenue (Decrease)	(4,691,810)
Expense (Decrease)	(5,398,005)
Subsidy Increase	<u>(706,195)</u>
Budgeted Expenditures	24,361,379
Revised FY19/20 Expenditures	18,963,374
FY19/20 Expenditure (Decrease)	<u>5,398,005</u>

 Controller
Signature Title
PATRICK GODLEY
Date: 08/13/20

Appropriation Adj. Journal NO. **AP00 5099**

CONTRA COSTA COUNTY
APPROPRIATION ADJUSTMENT
T/C 27

AUDITOR CONTROLLER USE ONLY

Final Approval Needed By:

- Board Of Supervisors
 County Administrator

ACCOUNT CODING		BUDGET UNIT: ENVIRONMENTAL HEALTH (0452)	Page 2 of 5	
ORG'N.		EXPENDITURE ACCOUNT DESCRIPTION	< DECREASE >	INCREASE
5877	1042	F.I.C.A.	1,261 .00	
5887	1019	COMP & S D I RECOVERIES	2,956 .00	
5878	1042	F.I.C.A.	3,149 .00	
5879	1042	F.I.C.A.	5,189 .00	
5880	1042	F.I.C.A.	6,450 .00	
5887	1042	F.I.C.A.	8,581 .00	
5873	1042	F.I.C.A.	10,884 .00	
5889	1042	F.I.C.A.	14,792 .00	
5884	1042	F.I.C.A.	19,673 .00	
5879	1043	RET EXP-PRE 1997 RETIREES	20,263 .00	
5885	1042	F.I.C.A.	20,875 .00	
5889	1043	RET EXP-PRE 1997 RETIREES	21,188 .00	
5886	1042	F.I.C.A.	26,218 .00	
5880	1044	RETIREMENT EXPENSE	29,337 .00	
5887	1044	RETIREMENT EXPENSE	38,171 .00	
5889	1044	RETIREMENT EXPENSE	66,546 .00	
5873	1044	RETIREMENT EXPENSE	69,107 .00	
5885	1044	RETIREMENT EXPENSE	80,856 .00	
5884	1044	RETIREMENT EXPENSE	84,114 .00	
5876	1044	RETIREMENT EXPENSE	89,107 .00	
5886	1044	RETIREMENT EXPENSE	99,888 .00	
5877	1044	RETIREMENT EXPENSE	108,059 .00	
5879	1044	RETIREMENT EXPENSE	156,746 .00	
5878	1044	RETIREMENT EXPENSE	211,210 .00	
5874	1042	F.I.C.A.		10 .00
5875	1042	F.I.C.A.		3,507 .00
5876	1042	F.I.C.A.		727 .00
5873	1043	RET EXP-PRE 1997 RETIREES		3,285 .00
5875	1043	RET EXP-PRE 1997 RETIREES		4,072 .00
5876	1043	RET EXP-PRE 1997 RETIREES		4,668 .00
5877	1043	RET EXP-PRE 1997 RETIREES		1,747 .00
5878	1043	RET EXP-PRE 1997 RETIREES		7,468 .00
5880	1043	RET EXP-PRE 1997 RETIREES		2,173 .00
5884	1043	RET EXP-PRE 1997 RETIREES		1,537 .00
5885	1043	RET EXP-PRE 1997 RETIREES		2,663 .00
5886	1043	RET EXP-PRE 1997 RETIREES		5,666 .00
5887	1043	RET EXP-PRE 1997 RETIREES		1,250 .00
5874	1044	RETIREMENT EXPENSE		41 .00
5875	1044	RETIREMENT EXPENSE		92,823 .00
5873	1060	EMPLOYEE GROUP INSURANCE		402 .00
Total			\$ 1,194,620 .00	\$ 132,039 .00

AUDITOR - CONTROLLER
By: *[Signature]* Date: 8/24/20

COUNTY ADMINISTRATOR
By: *[Signature]* Date: 9/9/20

BOARD OF SUPERVISORS

YES:
NO:

By: _____ Date: _____

EXPLANATION OF REQUEST

Revenue (Decrease)	(4,691,810)
Expense (Decrease)	(5,398,005)
Subsidy Increase	<u>(706,195)</u>
Budgeted Expenditures	24,361,379
Revised FY19/20 Expenditures	18,963,374
FY19/20 Expenditure (Decrease)	<u>5,398,005</u>

Signature: *[Signature]* Title: Controller Date: 08/13/20

Appropriation Adj. Journal NO. AP00 5099

CONTRA COSTA COUNTY
APPROPRIATION ADJUSTMENT
T/C 27

AUDITOR CONTROLLER USE ONLY

Final Approval Needed By:

- Board Of Supervisors
 County Administrator

ACCOUNT CODING		BUDGET UNIT: ENVIRONMENTAL HEALTH (0452)	Page 3 of 5	
ORG'N.		EXPENDITURE ACCOUNT DESCRIPTION	< DECREASE >	INCREASE
5880	1063	UNEMPLOYMENT INSURANCE	\$ 2.00	
5877	1063	UNEMPLOYMENT INSURANCE	\$ 36.00	
5887	1063	UNEMPLOYMENT INSURANCE	\$ 40.00	
5889	1063	UNEMPLOYMENT INSURANCE	\$ 46.00	
5873	1063	UNEMPLOYMENT INSURANCE	\$ 46.00	
5878	1063	UNEMPLOYMENT INSURANCE	\$ 75.00	
5886	1063	UNEMPLOYMENT INSURANCE	\$ 80.00	
5879	1063	UNEMPLOYMENT INSURANCE	\$ 88.00	
5885	1063	UNEMPLOYMENT INSURANCE	\$ 92.00	
5884	1063	UNEMPLOYMENT INSURANCE	\$ 106.00	
5876	1070	WORKERS COMPENSATION INS	\$ 383.00	
5876	1060	EMPLOYEE GROUP INSURANCE	\$ 661.00	
5880	1070	WORKERS COMPENSATION INS	\$ 1,074.00	
5877	1070	WORKERS COMPENSATION INS	\$ 1,365.00	
5873	1070	WORKERS COMPENSATION INS	\$ 2,855.00	
5879	1070	WORKERS COMPENSATION INS	\$ 3,182.00	
5878	1060	EMPLOYEE GROUP INSURANCE	\$ 3,547.00	
5878	1070	WORKERS COMPENSATION INS	\$ 3,685.00	
5884	1070	WORKERS COMPENSATION INS	\$ 4,161.00	
5886	1060	EMPLOYEE GROUP INSURANCE	\$ 7,404.00	
5879	1062	OPEB PRE-PAY	\$ 10,451.00	
5884	1060	EMPLOYEE GROUP INSURANCE	\$ 14,882.00	
5887	1060	EMPLOYEE GROUP INSURANCE	\$ 15,080.00	
5877	1060	EMPLOYEE GROUP INSURANCE	\$ 22,060.00	
5885	1060	EMPLOYEE GROUP INSURANCE	\$ 23,425.00	
5889	1060	EMPLOYEE GROUP INSURANCE	\$ 29,203.00	
5880	1060	EMPLOYEE GROUP INSURANCE	\$ 31,922.00	
5879	1060	EMPLOYEE GROUP INSURANCE	\$ 33,615.00	
5879	1061	RETIREE HEALTH INSURANCE	\$ 192,993.00	
5889	1061	RETIREE HEALTH INSURANCE	\$ 192,993.00	
5874	1060	EMPLOYEE GROUP INSURANCE		\$ 47.00
5875	1060	EMPLOYEE GROUP INSURANCE		\$ 9,332.00
5870	1061	RETIREE HEALTH INSURANCE		\$ 376,533.00
5889	1062	OPEB PRE-PAY		\$ 10,451.00
5874	1063	UNEMPLOYMENT INSURANCE		\$ - .00
5875	1063	UNEMPLOYMENT INSURANCE		\$ 163.00
5876	1063	UNEMPLOYMENT INSURANCE		\$ 21.00
5874	1070	WORKERS COMPENSATION INS		\$ 2.00
5875	1070	WORKERS COMPENSATION INS		\$ 3,847.00
Total			\$ 595,552.00	\$ 400,396.00

AUDITOR - CONTROLLER

By:  Date: 8/14/20

COUNTY ADMINISTRATOR

By:  Date: 8/14/20

BOARD OF SUPERVISORS

YES:

NO:

By: _____ Date: _____

EXPLANATION OF REQUEST

Revenue (Decrease)	(4,691,810)
Expense (Decrease)	(5,398,005)
Subsidy Increase	<u>706,195</u>

Budgeted Expenditures	24,361,379
Revised FY19/20 Expenditures	<u>18,963,374</u>
FY19/20 Expenditure (Decrease)	<u>5,398,005</u>



Signature
PATRICK GODLEY

Title
Controller

Date
08/13/20

Appropriation
Adj. Journal NO.

AP00 5099

CONTRA COSTA COUNTY
APPROPRIATION ADJUSTMENT
T/C 27

AUDITOR CONTROLLER USE ONLY

Final Approval Needed By:

- Board Of Supervisors
 County Administrator

ACCOUNT CODING		BUDGET UNIT: ENVIRONMENTAL HEALTH (0452)	Page 4 of 5	
ORG'N.		EXPENDITURE ACCOUNT DESCRIPTION	< DECREASE >	INCREASE
5889	2102	BOOKS-PERIODICLS-SUBSCRPT	\$2,700 .00	
5889	2111	TELEPHONE EXCHNGE SERVICE	\$2,800 .00	
5879	2102	BOOKS-PERIODICLS-SUBSCRPT	\$4,200 .00	
5879	2111	TELEPHONE EXCHNGE SERVICE	\$7,900 .00	
5889	2130	SMALL TOOLS & INSTRUMENTS	\$8,940 .00	
5879	2160	CLOTHING & PERSONAL SUPPL	\$9,000 .00	
5879	2200	MEMBERSHIPS	\$11,500 .00	
5889	2140	MEDICAL & LAB SUPPLIES	\$13,000 .00	
5879	2130	SMALL TOOLS & INSTRUMENTS	\$13,990 .00	
5879	2250	RENTS & LEASES -EQUIPMENT	\$14,000 .00	
5879	2251	COMPUTER SOFTWARE COST	\$14,100 .00	
5889	2251	COMPUTER SOFTWARE COST	\$14,100 .00	
5889	2160	CLOTHING & PERSONAL SUPPL	\$15,000 .00	
5889	2131	MINOR FURNITURE/EQUIPMENT	\$16,000 .00	
5879	2140	MEDICAL & LAB SUPPLIES	\$17,400 .00	
5889	2200	MEMBERSHIPS	\$17,500 .00	
5879	2477	ED SUPPLIES AND COURSES	\$19,500 .00	
5889	2250	RENTS & LEASES -EQUIPMENT	\$20,000 .00	
5889	2477	ED SUPPLIES AND COURSES	\$20,000 .00	
5889	2310	NON CNTY PROF SPCLZD SVCS	\$24,500 .00	
5879	2284	REQUESTED MAINTENANCE	\$28,000 .00	
5889	4953	AUTOS & TRUCKS	\$48,720 .00	
5887	2262	BLDG OCCUPANCY COSTS	\$49,000 .00	
5879	2131	MINOR FURNITURE/EQUIPMENT	\$68,000 .00	
5889	5022	INTRAFUND-TRANS-SERVICES	\$70,966 .00	
5877	2262	BLDG OCCUPANCY COSTS	\$85,000 .00	
5889	2340	OTHER INTRDPTMNTL CHARGES	\$122,500 .00	
5876	5022	INTRAFUND-TRANS-SERVICES	\$150,695 .00	
5879	2340	OTHER INTRDPTMNTL CHARGES	\$159,500 .00	
5879	2310	NON CNTY PROF SPCLZD SVCS	\$164,500 .00	
5875	5022	INTRAFUND-TRANS-SERVICES	\$200,000 .00	
5879	2479	OTHER SPECIAL DPMTAL EXP	\$679,241 .00	
5879	2360	INSURANCE		\$ 719,072 .00
5889	2360	INSURANCE		\$ 637,668 .00
5879	2360	INSURANCE		\$ 23,622 .00
5889	2360	INSURANCE		\$ 20,948 .00
5875	3612	INTERFUND EXP - GOV/ENT		\$ 360 .00
5879	4953	AUTOS & TRUCKS		\$ 14,703 .00
Total			\$ 2,092,252 .00	\$ 1,416,373 .00

AUDITOR CONTROLLER
By: *[Signature]* Date: *8/12/20*

COUNTY ADMINISTRATOR
By: *[Signature]* Date: *9/19/20*

BOARD OF SUPERVISORS
YES:

NO:

By: _____ Date: _____

EXPLANATION OF REQUEST

Revenue (Decrease)	(4,691,810)
Expense (Decrease)	(5,398,005)
Subsidy Increase	(706,195)
Budgeted Expenditures	24,361,379
Revised FY19/20 Expenditures	18,963,374
FY19/20 Expenditure (Decrease)	5,398,005

[Signature] Controller Date: 08/13/20

PATRICK GODLEY
Appropriation Adj. Journal NO. AP00 5099

CONTRA COSTA COUNTY
 APPROPRIATION ADJUSTMENT
 T/C 27

AUDITOR CONTROLLER USE ONLY

Final Approval Needed By:

- Board Of Supervisors
 County Administrator

ACCOUNT CODING		BUDGET UNIT: ENVIRONMENTAL HEALTH (0452)	Page 5 of 5	
ORG'N.		EXPENDITURE ACCOUNT DECSRIPTION	< DECREASE >	INCREASE
5885	1070	WORKERS COMPENSATION INS	\$ 4,378 00	
5886	1070	WORKERS COMPENSATION INS	\$ 5,394 00	
5887	1070	WORKERS COMPENSATION INS	\$ 1,755 00	
5889	1070	WORKERS COMPENSATION INS	\$ 2,805 00	
5879	5022	INTRAFUND-TRANS-SERVICES	\$ 1,442,042 00	
Total			\$ 1,456,374 .00	\$ - .00

AUDITOR CONTROLLER
 By:  Date: 8/21/20


COUNTY ADMINISTRATOR
 By:  Date: 9/9/20

BOARD OF SUPERVISORS
 YES:
 NO:
 By: _____ Date: _____

EXPLANATION OF REQUEST

Total Decrease/Increase: \$ 7,768,919 .00 \$ 2,370,914 .00

Revenue (Decrease)	(4,691,810)
Expense (Decrease)	(5,398,005)
Subsidy Increase	(706,195)
Budgeted Expenditures	24,361,379
Revised FY19/20 Expenditures	18,963,374
FY19/20 Expenditure (Decrease)	5,398,005


 Signature Title
 PATRICK GODLEY Controller
 Date 08/13/20

Appropriation Adj. Journal NO. AP00 5099

**CONTRA COSTA COUNTY
APPROPRIATION ADJUSTMENT
T/C 27**

AUDITOR CONTROLLER USE ONLY

Final Approval Needed By:

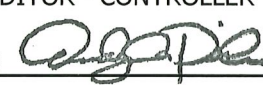
Board Of Supervisors

County Administrator

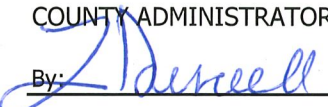
ACCOUNT CODING BUDGET UNIT(s): Public Administrator (0454)				Page 1 of 1	
ORG'N.	EXPENSE SUB-ACCT.	EXPENDITURE ACCOUNT DESCRIPTION	< DECREASE >		INCREASE
0454	1011	PERMANENT SALARIES			127,227 00
0454	1044	Retirement Expense	6,327	00	
0454	2251	Computer Software Cost			71,479 00
0454	5022	INTRAFUND-TRANS-SERVICES	4,533	00	
			10,860	.00	198,706 .00

Approved

AUDITOR - CONTROLLER

By:  Date: 8/21/20

COUNTY ADMINISTRATOR

By:  Date: 9/9/20

BOARD OF SUPERVISORS

YES:

NO:

By: _____ Date: _____

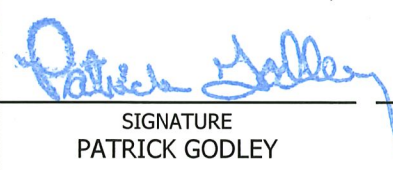
EXPLANATION OF REQUEST

This adjustment is necessary to align the budget with projected Annual Expenditures

County General Fund will DECREASE as a result of these adjustments.

Summary:

	Expenditure Increase	Revenue Increase	Cnty Cntrb. Decrease
HSD DEPT#0466	<u>\$187,846</u>	<u>345,606.00</u>	<u>(157,760.00)</u>



SIGNATURE: PATRICK GODLEY TITLE: COO/CFO DATE: _____

Appropriation Adj. Journal No. AP00 5099

CONTRA COSTA COUNTY
 APPROPRIATION ADJUSTMENT /
 ALLOCATION ADJUSTMENT
T/C 27

AUDITOR-CONTROLLER USE ONLY

FINAL APPROVAL NEEDED BY:

- BOARD OF SUPERVISORS
- COUNTY ADMINISTRATOR
- AUDITOR-CONTROLLER

ACCOUNT CODING		DEPARTMENT : Health Svcs-Calif Child Services #0460		Page 1 of 1	
ORGANIZATION	EXPENDITURE SUB-ACCOUNT	EXPENDITURE ACCOUNT DESCRIPTION	<DECREASE>		INCREASE
5890	1011	Perm Salaries	104,991	00	
5890	1013	Temp Salaries	170,033	00	
5890	1017	Perm Physician Salaries	27,218	00	
5890	1019	Comp & SDI Recoveries			4,528 00
5890	1042	F.I.C.A	20,622	00	
5890	1044	Retirement Expense	62,166	00	
5890	2100	Office Expense	35,960	00	
5890	2140	Medical & Lab Supplies	13,500	00	
5890	2300	Transportation	28,374	00	
5890	2310	Non Cnty Prof Spclzd Svcs			74,068 00
5890	2314	Contracted Temporary Help	278,806	00	
5890	2335	Other Telecom charges	10,245	00	
5890	2360	Insurance			115,420 00
5890	2477	Ed Supplies & Courses	9,273	00	
5890	3611	Interfund Exp GOV/GOV	600	00	
5890	5022	Intrafund-Trans-Services	185,464	00	
TOTALS			947,252	00	194,016 00

APPROVED

AUDITOR-CONTROLLER:

BY: *[Signature]* DATE 8/24/20

COUNTY ADMINISTRATOR:

BY: *[Signature]* DATE 9/9/20

BOARD OF SUPERVISORS:

YES:

NO:

BY: _____ DATE _____

(M129 Rev 05/09)

EXPLANATION OF REQUEST:

To adjust fiscal year ending 6/30/20 appropriation based on the most current estimates

Expenditure Increase (Decrease) (\$753,236.00)

Revenue Increase (Decrease) \$1,413,228.00

Co. Contrib. Increase (Decrease) (\$2,166,464.00)

[Signature]

SIGNATURE TITLE DATE

APPROPRIATION APOO 5099

ADJ. JOURNAL NO.

**CONTRA COSTA COUNTY
APPROPRIATION ADJUSTMENT
T/C 27**

AUDITOR CONTROLLER USE ONLY

Final Approval Needed By:


Board Of Supervisors

County Administrator

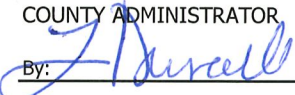
ACCOUNT CODING		BUDGET UNIT(s): HOMELESS PROGRAMS (Dept#0463)		Page 1 of 1	
ORG'N.	EXPENSE SUB-ACCT.	EXPENDITURE ACCOUNT	DESCRIPTION	< DECREASE >	INCREASE
5731	1011		Permanent Salaries	250,768.00 00	
5731	2170		Household Expense		112,516.00 00
5731	2262		Occ. Cost-Own Bldg.	535,430.00 00	
5731	2284		Requested Maintenance		486,077.00 00
5731	2310		Non Cnty Prof./Spclzd. Svcs	6,347,181.00 00	
5731	2360		Insurance		5,903,745.00 00
5731	4948		Interfund Exp - Gov/Gov	64,800.00 00	
5731	5011		Reimb Gov/Gov (Cnty Vehicles)		180,245.00 00
5731	5022		Intrafund-Trans-Services	2,365,521.00 00	
				9,563,700 .00	6,682,583 .00

Approved

AUDITOR - CONTROLLER

By:  Date: 6/24/20

COUNTY ADMINISTRATOR

By:  Date: 6/11/20

BOARD OF SUPERVISORS

YES:

NO:

By: _____ Date: _____


EXPLANATION OF REQUEST

This adjustment is necessary to align the budget with projected Annual Expenditures

County General Fund will INCREASE as a result of these adjustments.

Summary:

	Expenditure Decrease	Revenue Decrease	Cnty Cntrb. Increase
HSD DEPT#0463	<u>(\$2,881,117)</u>	<u>(3,668,288)</u>	<u>787,171.00</u>



SIGNATURE: PATRICK GODLEY

TITLE: COO/CFO

DATE: _____

Appropriation Adj. Journal No. AP00 5099


**CONTRA COSTA COUNTY
APPROPRIATION ADJUSTMENT
T/C 27**

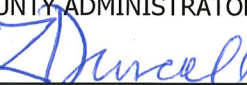
AUDITOR CONTROLLER USE ONLY

Final Approval Needed By:

- Board Of Supervisors
 County Administrator

ACCOUNT CODING		BUDGET UNIT(s): AODS (0466)	Page 1 of 1		
ORG'N.	EXPENSE SUB-ACCT.	EXPENDITURE ACCOUNT DESCRIPTION	< DECREASE >		INCREASE
5900	1011	PERMANENT SALARIES	72,303	00	
5900	1044	RETIREMENT EXPENSE	105,936	00	
5900	1060	EMPLOYEE GROUP INS	120,686	00	
5900	2320	OUTSIDE MEDICAL SERVICES	7,296,318	00	
5900	2360	INSURANCE			30,017 00
5900	4948	MISCELLANEOUS EQUIPMENT	13,500	00	
5900	5011	REIMBURSEMENTS-GOV/GOV			1,581 00
5900	5022	INTRAFUND-TRANS-SERVICES	124,578	00	
			7,733,321	.00	31,598 .00

Approved
AUDITOR - CONTROLLER
By:  Date: 8/24/10

COUNTY ADMINISTRATOR
By:  Date: 9/9/10

BOARD OF SUPERVISORS
YES:
NO:
By: _____ Date: _____


EXPLANATION OF REQUEST

This adjustment is necessary to align the budget with projected Annual Expenditures

County General Fund will DECREASE as a result of these adjustments.

Summary:

	Expenditure Decrease	Revenue Decrease	Cnty Cntrb. Increase
HSD DEPT#0466	<u>(7,701,723)</u>	<u>(\$8,126,758)</u>	<u>\$425,035</u>


SIGNATURE
PATRICK GODLEY

COO/CFO
TITLE
DATE

Appropriation Adj. Journal No. AP00 5099


CONTRA COSTA COUNTY
 APPROPRIATION ADJUSTMENT
 T/C 27

AUDITOR-CONTROLLER USE ONLY	
FINAL APPROVAL NEEDED BY:	
<input type="checkbox"/>	BOARD OF SUPERVISORS
<input type="checkbox"/>	COUNTY ADMINISTRATOR
<input type="checkbox"/>	AUDITOR-CONTROLLER


ACCOUNT CODING		DEPARTMENT: Mental Health Services (0467)	Page 1 of 2	
ORGANIZATION	EXPENSE SUB-ACCT.	EXPENDITURE ACCOUNT DESCRIPTION	< DECREASE >	INCREASE
5722	1011	Permanent Salaries	180,000 .00	.00
5724	1011	Permanent Salaries	250,000 .00	.00
5727	1011	Permanent Salaries	260,000 .00	.00
5735	1011	Permanent Salaries	600,000 .00	.00
5753	1011	Permanent Salaries	300,000 .00	.00
5906	1011	Permanent Salaries	400,000 .00	.00
5941	1011	Permanent Salaries	100,000 .00	.00
5943	1011	Permanent Salaries	170,000 .00	.00
5954	1011	Permanent Salaries	210,000 .00	.00
5971	1011	Permanent Salaries	550,000 .00	.00
5973	1011	Permanent Salaries	200,000 .00	.00
5974	1011	Permanent Salaries	310,000 .00	.00
5978	1011	Permanent Salaries	72,031 .00	.00
5983	1011	Permanent Salaries	100,000 .00	.00
5986	1011	Permanent Salaries	1,000,000 .00	.00
5997	1011	Permanent Salaries	300,000 .00	.00
5721	1013	Permanent Salaries	170,000 .00	.00
5941	1013	TEMPORARY SALARIES	200,000 .00	.00
5948	1013	TEMPORARY SALARIES	260,000 .00	.00
5991	1013	TEMPORARY SALARIES	240,000 .00	.00
5721	1017	Permanent Physician Salaries	590,000 .00	.00
5948	1017	Permanent Physician Salaries	230,000 .00	.00
5974	1017	Permanent Physician Salaries	260,000 .00	.00
5991	1017	Permanent Physician Salaries	1,180,000 .00	.00
5906	1044	Retirement Expense	130,000 .00	.00
5971	1044	Retirement Expense	110,000 .00	.00
5986	1044	Retirement Expense	170,000 .00	.00
5986	1060	Employee Group Insurance	170,000 .00	.00
5991	1060	Employee Group Insurance	105,000 .00	.00
5721	1061	RETIREE HEALTH INSURANCE	229,553 .00	.00
5948	1061	RETIREE HEALTH INSURANCE	400,000 .00	.00
5991	1061	RETIREE HEALTH INSURANCE	400,000 .00	.00
5948	1062	OPEB PRE-PAY	100,000 .00	.00
5991	1062	OPEB PRE-PAY	98,364 .00	.00
			10,044,948 .00	.00

Approved

AUDITOR - CONTROLLER

By:  Date: 8/24/20

COUNTY ADMINISTRATOR

By:  Date: 9/9/20

BOARD OF SUPERVISORS

YES:

NO:

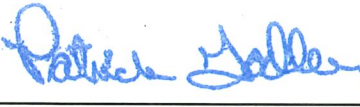
By: _____ Date: _____

EXPLANATION OF REQUEST

To adjust appropriation for salaries & benefits and services & supplies due to increase in costs

Summary:

Expenditure Increase(Decrease)	(2,370,660)
Revenue Increase(Decrease)	(13,860,804)
Co. Contrib. Increase(Decrease)	<u>\$ 11,490,144</u>



Signature: PATRICK GODLEY Title: COO/CFO Date: 08/13/20

Appropriation Adj. Journal NO. AP00 5099

CONTRA COSTA COUNTY
 APPROPRIATION ADJUSTMENT
 T/C 27

AUDITOR-CONTROLLER USE ONLY	
FINAL APPROVAL NEEDED BY:	
<input type="checkbox"/>	BOARD OF SUPERVISORS
<input type="checkbox"/>	COUNTY ADMINISTRATOR
<input type="checkbox"/>	AUDITOR-CONTROLLER

ACCOUNT CODING		DEPARTMENT: Mental Health Services (0467)	Page 2 of 2	
ORGANIZATION	EXPENSE SUB-ACCT.	EXPENDITURE ACCOUNT DESCRIPTION	< DECREASE >	INCREASE
5901	2262	BLDG OCCUPANCY COSTS	53,770 .00	.00
5942	2310	NON CNTY PROF SPCLZD SVCS	.00	4,200,000 .00
5721	2320	Outside Medical Services	1,033,771 .00	.00
5952	2320	Outside Medical Services	.00	2,379,850 .00
5944	2321	County Hospital Services	.00	4,206,675 .00
5942	2340	Other Interdepartmental Charges	.00	1,709,948 .00
5941	2360	INSURANCE	.00	870,927 .00
5994	3310	Support & CARE of Persons	1,619,236 .00	.00
5963	4951	OFFICE EQUIP & FURNITURE	.00	1,795 .00
5991	5022	Intrafund- Trans	2,988,130 .00	.00
			.00	.00
			5,694,907 .00	13,369,195 .00

Approved
 AUDITOR - CONTROLLER
 By: *[Signature]* Date: 08/13/20

COUNTY ADMINISTRATOR
 By: *[Signature]* Date: 9/9/20

BOARD OF SUPERVISORS
 YES:
 NO:

By: _____ Date: _____

EXPLANATION OF REQUEST
 To adjust appropriation for salaries & benefits and services & supplies due to increase in costs

Summary:

Expenditure Increase(Decrease)	\$ (2,370,660)
Revenue Increase(Decrease)	(13,860,804)
Co. Contrib. Increase(Decrease)	<u>\$ 11,490,144</u>

[Signature] COO/CFO Title Date 08/13/20

Signature: PATRICK GODLEY Title: COO/CFO Date: 08/13/20

Appropriation Adj. Journal NO. **AP00 5099**

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

ACCOUNT CODING		BUDGET UNIT: Health Services-Enterprise Fund I (145000-0540)	Page 1 of 1	
ORG'N.	REVENUE SUB-ACCT.	REVENUE ACCOUNT DESCRIPTION	INCREASE	<DECREASE>
6200	8111	Medicare RHS/IP		5,324,585 .00
6200	8121	Medi-Cal Patient Svcs		37,451,889 .00
6200	8131	Hlth Plan RHS/IP		16,906,492 .00
6200	8141	Commercial RHS/IP		3,158,153 .00
6200	8161	Interdept RHS/IP		508,734 .00
6200	8220	Grants & Donations		5,687,877 .00
6200	8220	Grants & Donations	24,689,345 .00	
6200	8220	Grants & Donations	29,624,938 .00	
6200	8230	Oth External Hosp Revenue		68,160 .00
6200	8231	Occupancy & Rental Charges		2,604 .00
6200	8232	Med Rec Charges		22,401 .00
6200	8233	Education & Training		3,101 .00
6200	8234	Cafeteria Receipts		99,321 .00
6200	8239	Misc Hospital Revenue	10,521,662 .00	
6200	8244	Interfund Trans-PFA/Hosp	840,505 .00	
6200	8276	Chg to A/DA/Mental Health	4,206,675 .00	
6200	8278	Interdept Pub Hlth	0 .00	
6200	8283	CHG to Other County Depts	37,296 .00	
6200	8313	Realignment VLF Revenue		7,427,808 .00
6200	8336	Interest Earnings		1,000,000 .00
6200	8337	St Aid Realignmnt-Hth-ENt	6,344,612 .00	
6200	8850	Rental and Leases	4,498 .00	
6200	8861	Bond Interest	37,470 .00	
6200	8381	Hospital Subsidy		130,625.00
			76,307,001 .00	77,791,750 .00

Approved
AUDITOR - CONTROLLER
By: *[Signature]* Date: 8/24/20

COUNTY ADMINISTRATOR
By: *[Signature]* Date: 9/9/20

BOARD OF SUPERVISORS
YES:

NO:

By: _____ Date: _____

EXPLANATION OF REQUEST

To adjust estimated revenues for fiscal year 2019/20 in both hospital units and the outpatient clinic services

Increase (Decrease) in Revenues (1,484,749)
 Increase (Decrease) in Expenditures (1,484,749)
 Increase (Decrease) in Co. Contrib. -

[Signature]
Signature
PATRICK GODLEY

COO/CFO
Title

08/06/20
Date

Revenue Adj.
Journal NO.

RA00 5099

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

ACCOUNT CODING		BUDGET UNIT: ENTERPRISE FUND 1 - CAPITAL (145000-0853)	Page 1 of 1	
ORG'N.	REVENUE SUB-ACCT.	REVENUE ACCOUNT DESCRIPTION	INCREASE	<DECREASE>
6971	8239	Misc Hospital Revenue	4,412,939 .00	
6977	8239	Misc Hospital Revenue		115,678 .00
6977	8220	GRANTS & DONATIONS	84,156 .00	
6979	8239	Misc Hospital Revenue		155,613 .00
6992	8239	Misc Hospital Revenue		3,893 .00
			\$4,497,095 .00	\$275,184 .00

APPROVED

AUDITOR - CONTROLLER
 By: Date: 07/24/20

COUNTY ADMINISTRATOR
 By: Date: 07/19/20

BOARD OF SUPERVISORS

YES:

NO:

By: _____ Date: _____

EXPLANATION OF REQUEST

To adjust FY19/20 Expected Revenues to Current Estimates.

Revenue Increase(Decrease)	\$4,221,911
Expense Increase(Decrease)	\$4,221,911
Subsidy Increase (Decrease)	\$0

COO/CFO 07/28/20

Signature Title Date

PATTRICK GODLEY

Revenue Adj. **RA00** 5099
Journal NO.

CONTRA COSTA COUNTY
ESTIMATED REVENUE ADJUSTMENT/
ALLOCATION ADJUSTMENT


T/C-24

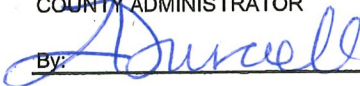
AUDITOR CONTROLLER USE ONLY

Final Approval Needed By:

- BOARD OF SUPERVISORS
- COUNTY ADMINISTRATOR
- AUDITOR-CONTROLLER

ACCOUNT CODING		DEPARTMENT: 0860: ENTERPRISE FUND 146000 (HMO ENTERPRISE)		
ORG'N.	REVENUE SUB-ACCT.	REVENUE ACCOUNT DESCRIPTION	INCREASE	<DECREASE>
6100	8312	PHP/Medi-Cal Premiums	38,599,107 00	
6100	8220	Grants & Donation	9,908,187 00	
			\$ 48,507,294 00	\$ - 00


Approved
AUDITOR - CONTROLLER,
By:  Date: 8/24/20

COUNTY ADMINISTRATOR
By:  Date: 7/19/20

BOARD OF SUPERVISORS
YES:
NO:
By: _____ Date: _____

EXPLANATION OF REQUEST
To adjust FY 2019/20 EF-II appropriations to current estimates.

Increase(Decrease) in Revenues	\$48,507,294
Increase(Decrease) in Expenditures	\$48,507,294
Increase(Decrease) in Co. Subsidy	\$0

 HSD CFO/COO
Signature: Patrick Godley Title: _____ Date: 8/6/20

Revenue Adj. Journal No. RA00 5099

CONTRA COSTA COUNTY
ESTIMATED REVENUE ADJUSTMENT/
ALLOCATION ADJUSTMENT

T/C-24

AUDITOR CONTROLLER USE ONLY

Final Approval (Required for Appropriation Adjustments)

- BOARD OF SUPERVISORS
 COUNTY ADMINISTRATOR
 AUDITOR-CONTROLLER

ACCOUNT CODING		DEPARTMENT: 0861:ENTERPRISE FUND 146100 (HMO ENTERPRISE-COMMUNITY PLAN)		
ORG'N.	REVENUE SUB-ACCT.	REVENUE ACCOUNT DESCRIPTION	INCREASE	<DECREASE>
6271	8317	CCHP Premiums		4,279,927 .00
6271	8220	GRANTS AND DONATION	4,097,820 .00	
			\$4,097,820 .00	\$4,279,927 .00

Approved
AUDITOR - CONTROLLER
By: *[Signature]* Date: 8/24/20

COUNTY ADMINISTRATOR
By: *[Signature]* Date: 7/9/20

BOARD OF SUPERVISORS
YES:
NO:

By: _____ Date: _____

EXPLANATION OF REQUEST

FY 2019/20 appropriation adjustment for Fund 146100:

Expenditure Increase (Decrease)	(\$182,107)
Revenue Increase (Decrease)	(\$182,107)
County Sidsidy Increase (Decrease)	\$0


Explanation:
To adjust appropriations and revenues to reflect changes to estimated FY 19/20 CCHP Community Plan premiums and expenditures.

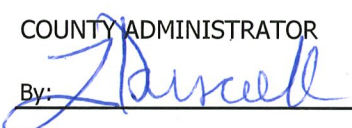
[Signature] HSD CFO/COO Date: 8/6/20

Signature Title Date
Patrick Godley _____
Revnue Adj. Journal No. RA00 5099

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

ACCOUNT CODING		BUDGET UNIT(s): DETENTION (Dept#00301)	Page 1 of 1	
ORG'N.	REVENUE SUB-ACCT.	REVENUE DESCRIPTION	INCREASE	< DECREASE >
5700	9263	State Aid Realign. - Sales Tx.	10,556 00	
5700	9259	State Aid Realign. - VLF		6,373 00
5700	9951	Reimbursements - Gov/Gov	77,698 00	
5700	9975	MISC NON-TAXABLE REVENUE	304 00	
5700	9785	M/H Svcs-Medi-Cal	539,902 00	
			628,460 .00	6,373 00

Approved
AUDITOR - CONTROLLER
 By:  Date: 8/24/20

COUNTY ADMINISTRATOR
 By:  Date: 7/19/20

BOARD OF SUPERVISORS

YES:
 5700

NO:
 5700

5701

By: _____ Date: _____

5700

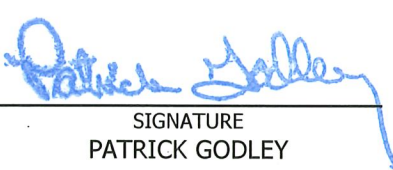
EXPLANATION OF REQUEST

This adjustment is necessary to align the budget with actual revenue below the adopted budget level.

County General Fund will INCREASE as a result of these adjustments.

Summary:

	<u>Expenditure Decrease</u>	<u>Revenue Increase</u>	<u>Cnty Cntrb. DECREASE</u>
HSD DEPT#0454	<u>(\$6,174,192)</u>	<u>\$622,087</u>	<u>(\$6,796,279)</u>


 SIGNATURE
 PATRICK GODLEY

COO/CFO _____ TITLE _____ DATE _____

Appropriation Adj. Journal No. **RA00 5099**

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

AUDITOR-CONTROLLER USE ONLY
Attachment A (County Appropriation Adjustments)

FINAL APPROVAL NEEDED BY:

- BOARD OF SUPERVISORS
- COUNTY ADMINISTRATOR
- AUDITOR-CONTROLLER

ACCOUNT CODING		DEPARTMENT : Public Health 0450	Page 1 of 1		
ORGANIZATION	REVENUE ACCOUNT	REVENUE ACCOUNT DESCRIPTION	INCREASE		<DECREASE>
5750	9281	Admin-State Health Misc.			5,531,746 00
5750	9283	State C.H.D.P. Program			281,556 00
5750	9325	Misc. State Aid for Health			614,412 00
5750	9435	Miscellaneous St Aid			152,176 00
5750	9491	Fed Health Admin (MCH&314D)			101,526 00
5750	9492	Fed Immunization Assist			64,972 00
5750	9494	Fed W.I.C. Program			171,302 00
5750	9499	Misc. Fed Health Projects	78,875	00	
5750	9763	Patient Fees			52,777 00
5750	9773	Patient Fees-TB Testing			20,074 00
5750	9851	Interfund Rev-Gov/Gov			47,115 00
5750	9895	Misc. Current Services			48,231 00
5750	9951	Reimbursements - Gov/Gov	122,045	00	
5750	9975	Misc. Non-Taxable Revenue			174,068 00
5750	9569	Other Federal Aid	12,396,510	00	
TOTALS			12,597,430	00	7,259,955 00

APPROVED

AUDITOR-CONTROLLER:

BY: *[Signature]* DATE 01/24/20

COUNTY ADMINISTRATOR:

BY: *[Signature]* DATE 9/9/20

BOARD OF SUPERVISORS:

YES:

NO:

BY: _____ DATE _____

(M8134 Rev 05/09)

EXPLANATION OF REQUEST:

To adjust fiscal year ending 6/30/2020 appropriation based on the most current estimates

Expenditure Increase (Decrease)	\$2,300,288.00
Revenue Increase (Decrease)	\$5,337,475.00
Co. Contrib. Inrease (Decrease)	(\$3,037,187.00)

[Signature] COO/CFO DATE 8/6/20

SIGNATURE TITLE

REVENUE ADJ. RAOO 5099
JOURNAL NO.

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

ACCOUNT CODING		BUDGET UNIT(s): Conservator/Guardianship (0451)	Page 1 of 1	
ORG'N.	REVENUE SUB-ACCT.	REVENUE DESCRIPTION	INCREASE	< DECREASE >
0451	9281	ADMIN-STATE HEALTH MISC		403,618 .00
			0 .00	403,618 .00

Approved
AUDITOR - CONTROLLER
By: *[Signature]* Date: 8/24/20

COUNTY ADMINISTRATOR
By: *[Signature]* Date: 9/9/20

BOARD OF SUPERVISORS

YES:

NO:

By: _____ Date: _____

EXPLANATION OF REQUEST

This adjustment is necessary to align the budget with actual revenue below the adopted budget level.

County General Fund will INCREASE as a result of these adjustments.

Summary:

	<u>Expenditure Decrease</u>	<u>Revenue Decrease</u>	<u>Cnty Contrb Increase</u>
HSD DEPT#0451	<u>(\$72,708)</u>	<u>(\$403,618)</u>	<u>\$30,910</u>

[Signature] COO/CFO

SIGNATURE TITLE DATE

PATRICK GODLEY

Appropriation Adj. Journal No. **RA00 5099**

CONTRA COSTA COUNTY
 APPROPRIATION ADJUSTMENT
T/C 24

Final Approval Needed By:

Board Of Supervisors

County Administrator

ACCOUNT CODING		BUDGET UNIT: ENVIRONMENTAL HEALTH (0452)	Page 1 of 1	
ORG'N.	REVENUE SUB-ACCT.	REVENUE ACCOUNT DESCRIPTION	INCREASE	<DECREASE>
5876	9761	HEALTH INSPECTION FEES		\$ 331,660 .00
5877	9761	HEALTH INSPECTION FEES		\$ 2,000,000 .00
5886	9761	HEALTH INSPECTION FEES		\$ 2,000,000 .00
5887	9761	HEALTH INSPECTION FEES		\$ 360,150 .00
Total			- .00	4,691,810 .00

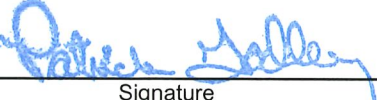
Approved
 AUDITOR - CONTROLLER
 By:  Date: 8/24/20

COUNTY ADMINISTRATOR
 By:  Date: 9/9/20

BOARD OF SUPERVISORS
 YES:
 NO:
 By: _____ Date: _____

EXPLANATION OF REQUEST

Revenue (Decrease)	(4,691,810)
Expense(Decrease)	(5,398,005)
Subsidy Increase	<u><u>(706,195)</u></u>
Budgeted Revenues	23,954,276
Revised FY 19-20 Revenues	<u>19,262,466</u>
FY19-20 Revenue Decrease	<u><u>4,691,810</u></u>

Signature:  Title: Controller Date: 08/13/20
 Signature: PATRICK GODLEY
 Revenue Adj. Journal NO. RA00 5099

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

ACCOUNT CODING		BUDGET UNIT(s): Public Administrator (0454)	Page 1 of 1	
ORG'N.	REVENUE SUB-ACCT.	REVENUE DESCRIPTION	INCREASE	< DECREASE >
0454	9690	Estate Fees	343,618 00	
0454	9956	Transfers Gov/Gov	1,988 00	
			345,606 .00	0 .00

Approved
AUDITOR - CONTROLLER
 By: *[Signature]* Date: 01/24/12

COUNTY ADMINISTRATOR
 By: *[Signature]* Date: 7/9/12

BOARD OF SUPERVISORS

YES:

NO:

By: _____ Date: _____

EXPLANATION OF REQUEST

This adjustment is necessary to align the budget with actual revenue below the adopted budget level.

County General Fund will DECREASE as a result of these adjustments.

Summary:

	<u>Expenditure Increase</u>	<u>Revenue Increase</u>	<u>Cnty Cntrb. Decrease</u>
HSD DEPT#0466	<u>\$187,846</u>	<u>\$345,606</u>	<u>(\$157,760)</u>

[Signature] **COO/CFO**

SIGNATURE: **PATRICK GODLEY** TITLE: _____ DATE: _____

Appropriation Adj. Journal No. **RA00 5099**

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

AUDITOR-CONTROLLER USE ONLY

FINAL APPROVAL NEEDED BY:

- BOARD OF SUPERVISORS
- COUNTY ADMINISTRATOR
- AUDITOR-CONTROLLER

ACCOUNT CODING		DEPARTMENT : Health Svcs-Calif Child Services #0460		Page 1 of 1	
ORGANIZATION	REVENUE ACCOUNT	REVENUE ACCOUNT DESCRIPTION	INCREASE		<DECREASE>
5890	9295	State Aid for Crippled Child	945,488	00	
5890	9296	CCS Medical Case Mgmt	500,196	00	
5890	9763	Patient Fees	1,269	00	
5890	9895	Misc. Current Services			73,218 00
5890	9951	Reimbursements - Gov/Gov	39,493	00	
TOTALS			1,486,446	00	73,218 00

APPROVED

AUDITOR-CONTROLLER:

BY: *[Signature]* DATE 01/24/20

COUNTY ADMINISTRATOR:

BY: *[Signature]* DATE 9/9/20

BOARD OF SUPERVISORS:

YES:

NO:

BY: _____ DATE _____

EXPLANATION OF REQUEST:

To adjust fiscal year ending 6/30/20 appropriation based on the most current estimates

Expenditure Increase (Decrease) (\$753,236.00)

Revenue Increase (Decrease) \$1,413,228.00

Co. Contrib. Increase (Decrease) (\$2,166,464.00)

[Signature] COO/CFO

SIGNATURE TITLE DATE

REVENUE ADJ. 1 RAOO 5099

JOURNAL NO.

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

AUDITOR CONTROLLER USE ONLY	
Final Approval Needed By:	
<input type="checkbox"/>	Board Of Supervisors
<input type="checkbox"/>	County Administrator

ACCOUNT CODING		BUDGET UNIT(s): HOMELESS PROGRAMS (Dept#0463)	Page 1 of 1	
ORG'N.	REVENUE SUB-ACCT.	REVENUE DESCRIPTION	INCREASE	< DECREASE >
5731	9191	Rent On Real Estate	15,202.00 00	
5731	9281	Admin - State Health Misc		141,591.00 00
5731	9499	Misc Fed Health Projects		7,521,256.00 00
5731	9569	Other Federal Aid	3,780,719.00 00	
5731	9595	Misc Govt Agencies		148,158.00 00
5731	9951	REIMBURSEMENTS - GOV/GOV	365,737.00 00	
5731	9956	Transfer - Gov/Gov	5,000.00 00	
5731	9975	Misc Non-taxable Revenue		23,941.00 00
			4,166,658 .00	7,834,946 .00

Approved
AUDITOR - CONTROLLER
By: *[Signature]* Date: *8/24/10*

EXPLANATION OF REQUEST
This adjustment is necessary to align the budget with actual revenue below the adopted budget level.
County General Fund will INCREASE as a result of these adjustments.

[Signature] *9/19/10*

HSD DEPT#0463	<u>Expenditure Decrease</u> (\$2,881,117)	<u>Revenue Decrease</u> (3,668,288)	<u>Cnty Cntrb. Increase</u> 787,171.00
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BOARD OF SUPERVISORS
YES:
NO:
By: _____ Date: _____

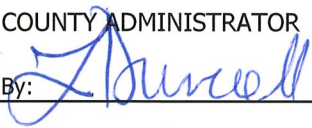
[Signature]
SIGNATURE TITLE DATE
PATRICK GODLEY COO/CFO

Appropriation Adj. Journal No. RA00 5099

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

ACCOUNT CODING		BUDGET UNIT(s): AODS (0466)	Page 1 of 1	
ORG'N.	REVENUE SUB-ACCT.	REVENUE DESCRIPTION	INCREASE	< DECREASE >
5900	9161	GENERAL FINES		34,799 00
5900	9194	RENT ON OFFICE SPACE		625 00
5900	9308	ST AID DRG AB SHORT-DOYLE		3,869,813 00
5900	9322	SUBSTANCE ABUSE-GRANTS	1,756,202 00	
5900	9770	DRINKING DRIVER PROGRAM	39,922 00	
5900	9785	M/H SVCS-MEDI-CAL		5,050,822 00
5900	9435	MISCELLANEOUS STATE AID		960,492 00
5900	9951	REIMBURSEMENTS-GOV TO GOV		6,331 00
			1,796,124 .00	9,922,882 .00

Approved
AUDITOR - CONTROLLER
 By:  Date: 2/24/20

COUNTY ADMINISTRATOR
 By:  Date: 2/19/20

BOARD OF SUPERVISORS

YES:
 NO:

By: _____ Date: _____

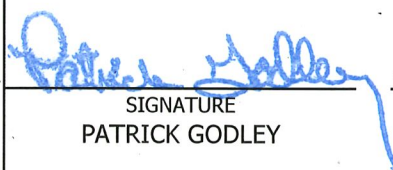
EXPLANATION OF REQUEST

This adjustment is necessary to align the budget with actual revenue below the adopted budget level.

County General Fund will DECREASE as a result of these adjustments.

Summary:

	Expenditure Decrease	Revenue Decrease	Cnty Cntrb. Increase
HSD DEPT#0454	(\$7,701,723)	(\$8,126,758)	\$425,035


 SIGNATURE
 PATRICK GODLEY

COO/CFO
 TITLE

DATE

Appropriation Adj. Journal No. **RA00 5099**

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


Attachment A (County Appropriation Adjustments)

AUDITOR-CONTROLLER USE ONLY
FINAL APPROVAL NEEDED BY:
<input type="checkbox"/> BOARD OF SUPERVISORS
<input type="checkbox"/> COUNTY ADMINISTRATOR
<input type="checkbox"/> AUDITOR-CONTROLLER


ACCOUNT CODING		DEPARTMENT: Mental Health Services (0467)	page 1 of 1	
ORGANIZATION	REVENUE ACCOUNT	REVENUE ACCOUNT DESCRIPTION	INCREASE	<DECREASE>
5948	9306	State Aid MH Short Doyle	21,427 .00	
5991	9307	ST AID MH - SSI/SSP	94,864 .00	.00
5991	9310	ST AID REALIGNMENT-M/H	.00	812,742 .00
5941	9311	ST AID REALIGNMENT-VLF-MH	.00	1,680,323 .00
5991	9311	ST AID REALIGNMENT-VLF-MH	.00	2,383,754 .00
5960	9435	Misc. State Aid	.00	313,817 .00
5991	9555	Fed Aid Employ & Training	.00	399,367 .00
5991	9558	Fed Aid NIMH Grant	592,523 .00	.00
5944	9781	M/H SVCS-MEDICARE	696,119 .00	.00
5952	9785	MH Svcs - Medi-Cal	9,612,398 .00	.00
5944	9786	M/H SVCS-OTHER HMO PAT	619 .00	.00
5944	9782	M/H SVCS-PVT PAY/INSUR	.00	400,000 .00
5721	9951	Reimbursement (Gov/Gov)	.00	3,613,324 .00
5948	9951	Reimbursement (Gov/Gov)	.00	14,146,921 .00
5948	9191	RENT ON REAL ESTATE	.00	1,500 .00
5991	9975	MISC NON-TAXABLE REVENUE	.00	1,127,006 .00
			11,017,950 .00	24,878,754 .00

Approved

AUDITOR - CONTROLLER

By:  Date: 8/24/20

COUNTY ADMINISTRATOR

By:  Date: 9/9/20

BOARD OF SUPERVISORS

YES:

NO:


By: _____ Date: _____

EXPLANATION OF REQUEST

To adjust revenue resulting from decrease in realignment and other revenues

Summary:

Expenditure Increase(Decrease)	\$ (2,370,660)
Revenue Increase(Decrease)	(13,860,804)
Co. Contrib. Increase(Decrease)	\$ 11,490,144



Signature: PATRICK GODLEY Title: COO/CFO Date: 08/13/20

Revenue Adj. Journal NO. RA00 5099