

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 : Veterans Service Office (0579) | | | |
|----------------|----------------------------|---|------------|----|------------|
| ORGANIZATION | EXPENDITURE SUB-ACCOUNT | EXPENDITURE ACCOUNT DESCRIPTION | <DECREASE> | | INCREASE |
| 0579 | 1011 | PERMANENT SALARIES | | | 160,900 00 |
| 0579 | 1015 | DEFERRED COMP | | | 3,600 00 |
| 0579 | 1044 | RETIREMENT | | | 34,522 00 |
| 0579 | 1060 | EMPLOYEE GROUP INSURANCE | | | 38,024 00 |
| 0579 | 1070 | WORKERS COMPENSATION INS | | | 1,681 00 |
| 0579 | 2110 | COMMUNICATIONS | | | 4,273 00 |
| 0579 | 2340 | OTHER INTRDPTMNTL CHARGES | | | 98,000 00 |
| 0579 | 2479 | OTHER SPECIAL DEPARTMENTAL EXP | 30,000 | 00 | |
| TOTALS | | | 30,000 | 00 | 341,000 00 |

APPROVED

AUDITOR-CONTROLLER:

BY: [Signature] DATE 2-22-22

COUNTY ADMINISTRATOR:

BY: [Signature] DATE 2-22-22

BOARD OF SUPERVISORS:

YES:

NO:

BY: _____ DATE _____

EXPLANATION OF REQUEST:

To reflect salary and benefit cost of additional positions and services and supplies to support dept. service expansion

[Signature] Sr. Deputy Co. Admin 1/25/2022
SIGNATURE TITLE DATE

APPROPRIATION APOO 5032
ADJ. 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 : Veterans Service Office (0579) | | | |
|----------------|-----------------|---|----------|----|------------|
| ORGANIZATION | REVENUE ACCOUNT | REVENUE ACCOUNT DESCRIPTION | INCREASE | | <DECREASE> |
| 0579 | 9380 | ST AID VETERANS AFFAIRS | 188,000 | 00 | |
| 0579 | 9975 | MISC NON-TAXABLE REVENUE | 123,000 | 00 | |
| TOTALS | | | 311,000 | 00 | 0 00 |

APPROVED

AUDITOR-CONTROLLER:

BY: [Signature] DATE 2-22-22

COUNTY ADMINISTRATOR:

BY: [Signature] DATE 2-22-22

BOARD OF SUPERVISORS:

YES:

NO:

BY: _____ DATE _____

(M8134 Rev 05/09)

EXPLANATION OF REQUEST:

To reflect increase of CA Dept. of Veterans Affairs Subvention revenues and increase of Prop 63 Grant funding

[Signature] Sr. Deputy Co. Admin 1/25/2022
SIGNATURE TITLE DATE

REVENUE ADJ. RAOO 5032
JOURNAL NO.