
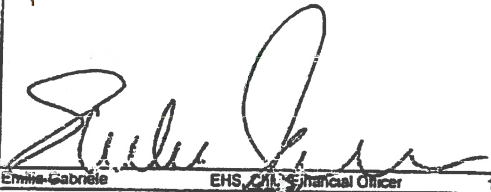


| CONTRA COSTA COUNTY ESTIMATED REVENUE ADJUSTMENT/ ALLOCATION ADJUSTMENT T/C 24 | | | AUDITOR-CONTROLLER USE ONLY FINAL APPROVAL NEEDED BY: | | |
|---|--------------------|--|--|------------|------|
| | | | <input checked="" type="checkbox"/> BOARD OF SUPERVISORS <input checked="" type="checkbox"/> COUNTY ADMINISTRATOR <input checked="" type="checkbox"/> AUDITOR-CONTROLLER | | |
| ACCOUNT CODING | | DEPARTMENT : DEPT. 0503, AGING & ADULT SRVCS (IHSS PA) | | | |
| ORGANIZATION | REVENUE ACCOUNT | REVENUE ACCOUNT DESCRIPTION | INCREASE | <DECREASE> | |
| 5273 | 9252 | ADMIN ST OUT OF HOME CARE | 309,916 | | |
| 5273 | 9252 | ADMIN ST OUT OF HOME CARE | 541,534 | | |
| 5273 | 9263 | ST AID REALIGNMENT-SALES TAX | 346,212 | | |
| 5273 | 9259 | ST AID REALIGNMENT-VLF | 975,938 | | |
| 5273 | 9263 | ST AID REALIGNMENT-SALES TAX | 1,050,661 | | |
| 5273 | 9569 | OTHER FEDERAL AID | 232,634 | | |
| 5273 | 9589 | OTHER FEDERAL AID | 523,551 | | |
| 5273 | 9252 | ADMIN ST OUT OF HOME CARE | 331,845 | | |
| 5273 | 9252 | ADMIN ST OUT OF HOME CARE | 2,818,104 | | |
| TOTALS | | | 7,129,395 | 00 | 0 00 |

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|--|--|
| <p style="text-align: center;">APPROVED</p> <p>AUDITOR-CONTROLLER: BY: <u>[Signature]</u> DATE <u>11/15/17</u></p> <p>COUNTY ADMINISTRATOR: BY: <u>[Signature]</u> DATE <u>11/21/17</u></p> <p>BOARD OF SUPERVISORS:</p> <p>YES: Gioa, Andersen, Burgis, Mitchoff, Glover</p> <p>NO: None</p> <p>BY: <u>[Signature]</u> DATE <u>12/5/2017</u></p> | <p>EXPLANATION OF REQUEST:</p> <p>To appropriate increased revenue in FY 17/18 for Aging & Adult Services (Org 0503) due to the reinstatement of the IHSS Maintenance of Effort (MOE). Also increasing revenue to cover increased benefit costs. Also increasing revenue to account for AB85, Sales Tax and Vehicle License Fee (VLF) revenue being redirected from Health Services and Mental Health accounts to offset increased MOE costs.</p> <div style="text-align: center;">  Emilia Gabriele Chief Financial Officer </div> <div style="display: flex; justify-content: space-between;"> <div>SIGNATURE</div> <div>TITLE</div> <div>DATE</div> </div> <div style="display: flex; justify-content: space-between;"> <div>REVENUE ADJ.</div> <div>RA00</div> <div>5028</div> </div> <div style="display: flex; justify-content: space-between;"> <div>JOURNAL NO.</div> <div></div> <div></div> </div> |
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| CONTRA COSTA COUNTY APPROPRIATION ADJUSTMENT T/C 27 | | | AUDITOR-CONTROLLER USE ONLY FINAL APPROVAL NEEDED BY: | | | |
|---|----------------------------|--|--|---|----------|-----------|
| | | | <input checked="" type="checkbox"/> BOARD OF SUPERVISORS <input checked="" type="checkbox"/> COUNTY ADMINISTRATOR <input checked="" type="checkbox"/> AUDITOR CONTROLLER | | | |
| ACCOUNT CODING | | DEPARTMENT : DEPT. 0503, AGING & ADULT SRVCS (IHSS PA) | | | | |
| ORGANIZATION | EXPENDITURE SUB-ACCOUNT | EXPENDITURE ACCOUNT DESCRIPTION | <DECREASE> | | INCREASE | |
| 5273 | 3313 | COUNTY AID, BASIC | | | | 4,289,227 |
| 5273 | 2310 | NON CNTY PROF SPCLZD SVCS | | | | 433,380 |
| 5273 | 2340 | OTHER INTRDPTMNTL CHARGES | | | | 975,337 |
| 5273 | 3310 | SUPPORT & CARE OF PERSONS | | | | 1,431,451 |
| TOTALS | | | | 0 | | 7,129,395 |
| APPROVED AUDITOR-CONTROLLER: BY: <u><i>[Signature]</i></u> DATE <u>11/15/17</u> COUNTY ADMINISTRATOR: BY: <u><i>Emil Mendez</i></u> DATE <u>11/21/17</u> BOARD OF SUPERVISORS: YES: Gioia, Andersen, Burgis, Mitchoff, Glover NO: None BY: <u><i>Stacy M Boyd</i></u> DATE <u>12/5/2017</u> | | | EXPLANATION OF REQUEST To appropriate increased expenditures in FY 17/18 for Aging & Adult Services (Org 0503) due to the reinstatement of the IHSS Maintenance of Effort (MOE). Also increasing the expenditures for Org 0503 due to increased benefits costs (retirement and Contra Costa Health Plan). <div style="text-align: center;">  EHS, CIL Financial Officer SIGNATURE TITLE DATE 11/8/2017 </div> <div style="text-align: center;"> APPROPRIATION APOO <u>5028</u> ADJ. JOURNAL NO. </div> | | | |