

**CONTRA COSTA COUNTY
ESTIMATED REVENUE ADJUSTMENT/
ALLOCATION ADJUSTMENT
TC/24**

AUDITOR-CONTROLLER USE ONLY:

FINAL APPROVAL NEEDED BY:

☒ BOARD OF SUPERVISORS☒ COUNTY ADMINISTRATOR☒ AUDITOR-CONTROLLER

2020 FEB -4 P 3:12

ACCOUNT CODING		DEPARTMENT: Depts. 0503, EHSD CAL OES GRANT		
ORGANIZATION	REVENUE ACCOUNT	REVENUE ACCOUNT DESCRIPTION	INCREASE	<DECREASE>
5317	9569	OTHER FEDERAL AID	205,862.00	
TOTALS			205,862.00	0.00

<p align="center">APPROVED</p> <p>AUDITOR – CONTROLLER By: <u>[Signature]</u> Date <u>2/5/20</u></p> <p>COUNTY ADMINISTRATOR By: _____ Date _____</p> <p>BOARD OF SUPERVISORS YES: Gioia, Andersen, Burgis, Mitchoff, Glover NO: None</p> <p>By: <u>Stacy M Boyd</u> Date <u>02/25/2020</u></p>	<p>EXPLANATION OF REQUEST</p> <p>To increase estimated revenue for federal grant funding for California Office of Emergency Services (Cal OES) XC Grant. Cal OES XC grant will reflect additional contracted Community Based Organizations. See AIR 40624.</p> <p align="right"><u>A. Hermanson</u> 2/4/2020</p> <p>PREPARED BY: <u>Alicia Hermanson</u> TITLE: <u>EHSD, Departmental Fiscal Officer</u> DATE: <u>2/4/2020</u></p> <p align="right">REVENUE ADJ. JOURNAL NO. <u>5048</u></p>
---	---

**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

2020 FEB -4 P 3:12

ACCOUNT CODING		DEPARTMENT: Dept 0503, EHSD - AAS - CAL OES XC		
ORGANIZATION	EXPENDITURE SUB-ACCOUNT	EXPENDITURE ACCOUNT DESCRIPTION	<DECREASE>	INCREASE
5317	1011	PERMANENT SALARIES		16,950.50
5317	1042	FICA		1,262.00
5317	1044	RETIREMENT EXPENSE		4,761.00
5317	1060	EMPLOYEE GROUP INSURANCE		1,588.00
5317	1063	UNEMPLOYMENT INSURANCE		9.00
5317	1070	WORK COMP		522.00
5317	1015	DEF COMP		38.00
5317	2340	OTHER INTRDPTMNTL CHARGES		32,967.00
5317	2310	NON CNTY PROF SPCLZD SVCS		147,764.50
			0.00	205,862.00

<p align="center">APPROVED</p> <p>AUDITOR - CONTROLLER</p> <p>By: <u>[Signature]</u> Date <u>2/5/20</u></p> <p>COUNTY ADMINISTRATOR</p> <p>By: _____ Date _____</p> <p>BOARD OF SUPERVISORS</p> <p>YES: Gioia, Andersen, Burgis, Mitchoff, Glover NO: None</p> <p>By: <u>Stacy M Boyd</u> Date <u>02/25/2020</u></p>	<p align="center">EXPLANATION OF REQUEST</p> <p>To increase estimated expenses for federal grant California Office of Emergency Services (Cal OES) XC. Increase in expenses is due to revenue increase. See AIR 40624.</p> <p align="right"><i>A. Hermanson 2/4/2020</i></p> <p>PREPARED BY: <u>Alicja Hermanson</u> TITLE: <u>EHSD, Departmental Fiscal Officer</u> DATE: <u>2/4/2020</u></p> <p align="right">APPROPRIATION <u>APOO 5048</u> ADJ. JOURNAL NO.</p>
--	---