



county of Santa Cruz

311

HUMAN RESOURCES AGENCY

CECILIA ESPINOLA, ADMINISTRATOR

1000 EMELINE ST., SANTA CRUZ, CA 95060

(408) 454-4130 OR 4544045 FAX: (408) 454-4642

May 11, 1999

Agenda: May 25, 1999

BOARD OF SUPERVISORS

County of Santa Cruz
701 Ocean Street
Santa Cruz, CA 95060

MID-YEAR BUDGET REALIGNMENT AND UNANTICIPATED REVENUE

Dear Members of the Board:

The Human Resources Agency (HRA) annually produces an estimated/actual budget in order to compare spending patterns to funds appropriated.

As a result of this year's process we have determined that a transfer of funds is necessary within various HRA indexes and sub-objects. We are requesting that your Board approve the attached AUD-74 transfer of funds within the following: Social Services 392100; Categorical Aids 392200; General Assistance 392300.

In addition, the Adoption Assistance Program has experienced more than a 24% caseload growth since the beginning of the fiscal year, and statistics show that we are placing more children with special needs. This combination of factors has increased our assistance payments beyond what we had originally budgeted for 1998-99. Therefore we are requesting approval of a resolution accepting unanticipated revenue in the amount of \$352,000 for the federal and state revenues associated with the increased costs.

IT IS THEREFORE RECOMMENDED that your Board:

1. Approve the attached Request for Transfer of Budget Appropriations within HRA, and

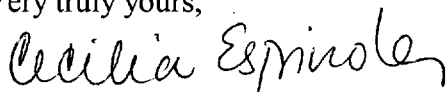
BOARD OF SUPERVISORS

May 25, 1999

Mid-Year Budget Realignment and Unanticipated Revenue

2. Adopt the Resolution Accepting Unanticipated Revenue in the amount of \$352,000 into Index 392200 Categorical Aids.

Very truly yours,

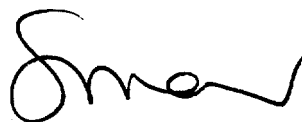
CECILIA ESPINOLA
Administrator

CE/DA:pb

Attachments

cc: Auditor Controller

RECOMMENDED:

SUSAN A. MAURIELLO
County Administrative Officer

COUNTY OF SANTA CRUZ
REQUEST FOR TRANSFER OR REVISION
OF BUDGET APPROPRIATIONS AND/OR FUNDS

Department: Human Resources Agency

D a t e 313 5/11/99

TO: Board of Supervisors / County Administrative Officer / District Board

I hereby request your approval of the following transfer of budget appropriations **and/or** funds in the fiscal year ending June 30, 1999

AUDITORS USE ONLY			
DOCUMENT #	AMOUNT	L/N	T/C HASH
JE 6	342000000	5	107

BATCH #	
DATE	Keyed By:

	T/C	INDEX	SUBJECT	USER CODE	AMOUNT	ACCOUNT DESCRIPTION *
T R A N S F E R	0 2 1	3 9 2 1 0 0	3 6 6 5		1 0 0 0 0 0 0 0	Prof & Spec
	0 2 1	3 9 2 2 0 0	4 3 6 5		4 8 0 0 0 0 0 0	Adoptions
	0 2 1	3 9 2 3 0 0	4 5 2 0		2 3 0 0 0 0 0 0	General Assistance
	0 2 2	3 9 2 1 0 0	3 1 0 0		1 0 0 0 0 0 0 0	Regular Pay
	0 2	2 3 9 2 2 0	0 4 3 7 5		7 0 0 0 0 0 0 0	AFDC (CalWORKS's)
F R O M						

Explanation:

Transfer appropriations in order to meet payment and budgetary requirements based on 1998-99 Estimated Actual budget estimates.

Name Heidi Ann Alcorn Title Fiscal Officer

Auditor-Controller's Action: I hereby certify that unencumbered balance(s) is/are available in the appropriations/funds and in the amounts indicated above.

Auditor-Controller, by Ronald J. Silva, Deputy Date 5/12/99

County Administrative Officer's Action: ☒ Recommended to Board ☐ Approved ☐ Not Recommended or Approved

County Administrative Officer [Signature] Date 5/12/99

State of California }
County of Santa Cruz } ss. As the Clerk of the Board of Supervisors of the County of Santa Cruz, I do hereby certify that the foregoing request for transfer was approved by said Board of Supervisors as recommended by the County Administrative Officer by an order duly entered in the minutes of said Board on

_____, 19____, By _____, Deputy Clerk

(A-C)* Desc: _____ # _____ - Budget Transfer

Distribution:

White-Board of Supervisors
Yellow-Auditor-Controller

BRD. NAME

AGENDA DATE

ITEM NO.

Green-County Administrative Officer
Pink-Originating Department

Goldenrod-Departmental Control Copy

A-C Review		

BEFORE THE BOARD OF SUPERVISORS
OF THE COUNTY OF SANTA CRUZ, STATE OF CALIFORNIA

31 4

RESOLUTION NO. _____

On the motion of Supervisor _____
duly seconded by Supervisor _____
the following resolution is adopted:

RESOLUTION ACCEPTING UNANTICIPATED REVENUE

WHEREAS, the County of Santa Cruz is a recipient of funds from State Dept
of Social Services for Adoption Assistance program; and

WHEREAS, the County is recipient of funds in the amount of \$ 352,000
which are either in excess of **those anticipated** or are not specifically set
forth in the current fiscal year budget of the County; and

WHEREAS, pursuant to Government Code Section **29130(c)/29064(b)**, such funds
may be made available for specific appropriation by a four-fifths vote of
the Board of Supervisors;

NOW, THEREFORE, BE IT RESOLVED AND ORDERED that the Santa Cruz County
Auditor-Controller accept funds in the amount of \$ 352,000 t _____ o

Department HRA/Categorical Aids

<u>T/C</u>	<u>Index Number</u>	<u>Revenue Subobject Number</u>	<u>Account Name</u>	<u>Amount</u>
001	392200	0518	State - Adoptions	148,000
001	392200	0952	Fed - Adoptions	204,000

and that such funds be and are hereby appropriated as follows:

<u>T/C</u>	<u>Index Number</u>	<u>Expenditure Subobject Number</u>	<u>PRJ/UCD</u>	<u>Account Name</u>	<u>Amount</u>
021	392200	4365		Adoptions	352,000

DEPARTMENT HEAD I hereby certify that the fiscal provisions have been
researched and that the Revenue(s) ~~(has been)~~ (will be) received within the
current fiscal year.

By Heather Adams
Department Head

Date 5/11/99

COUNTY ADMINISTRATIVE OFFICER

☐ Recommended to Board

317

☐ Not Recommended to Board

PASSED AND ADOPTED by the Board of Supervisors of the County of Santa Cruz,
state of California, this _____ day of _____
by the following vote (requires four-fifths vote for approval): _____ 19 _____

AYES: SUPERVISORS

NOES: SUPERVISORS

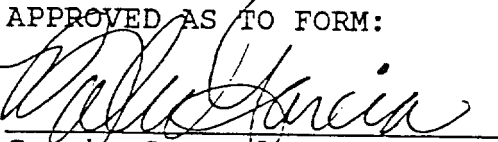
ABSENT: SUPERVISORS

Chairperson of the Board

ATTEST:

Clerk of the Board

APPROVED AS TO FORM:


County Counsel

APPROVED AS TO ACCOUNTING DETAIL:

 5/12/99
Auditor-Controller

Distribution:

Auditor-Controller
County Council
County Administrative Officer
Originating Department