

County Of Santa Clara
Request For Appropriation Modification
Fiscal Year = 2024

F - 85 # 190

Line	Fund	Budget Unit	Cost Center	CI	Description	Job Code	Funded Program	CMB Revenues	CMB Expenditures	
1	0001	0102	1102	5101000	Permanent Employees				(30,000.00)	
2	0001	0102	1102	5250100	Office Expense				15,000.00	
3	0001	0102	1102	5255100	Professional and Specialized Services				15,000.00	
0001		Transfer (From) To Fund Balance:							0.00	0.00
					Grand Total:			0.00	0.00	

Form ID# Included:

40184,