

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

F - 85 # 176

Line	Fund	Budget Unit	Cost Center	CI	Description	Job Code	Funded Program	CMB Revenues	CMB Expenditures
1	0001	0120	1350	5101000	Permanent Employees	B14			(50,265.00)
2	0001	0120	1350	5110100	Retiree Medical Insurance	B14			(2,762.00)
3	0001	0120	1350	5110200	Health Insurance	B14			(10,280.00)
4	0001	0120	1350	5110300	Unemployment Insurance	B14			(23.00)
5	0001	0120	1350	5110400	FICA - Employer Share	B14			(3,117.00)
6	0001	0120	1350	5110500	Medicare Tax - Employer Share	B14			(730.00)
7	0001	0120	1350	5110602	PERS-Employer Paid Employer Contribution	B14			(2,925.00)
8	0001	0120	1350	5110603	PERS-Unfunded Accrued Liability-Misc	B14			(6,178.00)
9	0001	0120	1350	5110610	Pension Obligation Bond-PERS UAL-Misc	B14			(467.00)
10	0001	0120	1350	5110700	Workers' Compensation	B14			(258.00)
11	0001	0120	1350	5111200	Deferred Comp Expense -ER	B14			(8.00)
12	0001	0120	1350	5440200	IC - Reimb - Professional & Special Serv				46,208.00
13	0001	0501	4800	5101000	Permanent Employees	B14			50,265.00
14	0001	0501	4800	5110100	Retiree Medical Insurance	B14			2,762.00
15	0001	0501	4800	5110200	Health Insurance	B14			10,280.00
16	0001	0501	4800	5110300	Unemployment Insurance	B14			23.00
17	0001	0501	4800	5110400	FICA - Employer Share	B14			3,117.00
18	0001	0501	4800	5110500	Medicare Tax - Employer Share	B14			730.00
19	0001	0501	4800	5110602	PERS-Employer Paid Employer Contribution	B14			2,925.00
20	0001	0501	4800	5110603	PERS-Unfunded Accrued Liability-Misc	B14			6,178.00

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

F - 85 # **176**

Line	Fund	Budget Unit	Cost Center	CI	Description	Job Code	Funded Program	CMB Revenues	CMB Expenditures
21	0001	0501	4800	5110610	Pension Obligation Bond-PERS UAL-Misc	B14			467.00
22	0001	0501	4800	5110700	Workers' Compensation	B14			258.00
23	0001	0501	4800	5111200	Deferred Comp Expense -ER	B14			8.00
24	0001	0501	4856	5258200	IC-Professional Services - Internal				(46,208.00)
0001					Transfer (From) To Fund Balance:				0.00
					Grand Total:			0.00	0.00

Form ID# Included:

39876, 39877, 39878,