BEFORE THE BOARD OF SUPERVISORS

OF THE COUNTY OF SANTA CRUZ, STATE OF CALIFORNIA

Resolution No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

On the motion of Supervisor \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Duly seconded by Supervisor\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The following resolution is adopted:

RESOLUTION CANCELLING ESTIMATED REVENUES AND APPROPRIATION

WHEREAS, the Board of Supervisors of the County of Santa Cruz adopted by resolution certain estimated revenues and appropriations for the final budget; and

WHEREAS, certain of the estimated revenues will now not be realized; and

WHEREAS, pursuant to Government Code Section 29126.1, the Board of Supervisors may cancel any unused appropriation in whole or in part upon determining that the source of funding will be unrealized in whole or in part;

NOW, THEREFORE, BE IT RESOLVED AND ORDERED that the Auditor-Controller cancel estimated revenues in the amount of $ \_\_

In Department \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Revenue

T/C Index Number Subobject Number PRJ/UCD Account Name Amount

002

and that appropriations will be cancelled as follows:

Expenditure

T/C Index Number Subobject Number PRJ/UCD Account Name Amount

022

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PASSED AND ADOPTED by the Board of Supervisors of the County of Santa Cruz, State of California, this day of , 20\_\_\_\_ by the following vote (requires three-fifths vote of approval):

AYES: SUPERVISORS

NOES: SUPERVISORS

# ABSENT: SUPERVISORS

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Chairperson of the Board

ATTEST:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Clerk of the Board

DEPARTMENT HEAD I hereby certify that the fiscal provisions have been researched and are sufficient to allow entering in the County records.

By : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Department Head

COUNTY ADMINISTRATIVE OFFICER / / Recommended to Board

/ / Not recommended to Board

APPROVED AS TO FORM: APPROVED AS TO ACCOUNTING DETAIL:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

County Counsel Auditor-Controller

Distribution:

Auditor-Controller

County Counsel

## County Administrative Officer

### Originating Department

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