REQUEST FOR SUPPLEMENTAL APPROPRIATION

DEPARTMENT: Mayor  DIVISION: Mayor’s Office of Housing and Community Development
DATE: July 22, 2016

To the Mayor:

Request is hereby made for supplemental appropriation from the following appropriation(s) or fund(s) in the amount(s) indicated on the attached summary worksheet.

There are no surpluses in any of this department's appropriations available for transfer for the requested purpose(s). Complete detail as to the necessity for THIS appropriation is stated in attached letter.

APPLICABLE BOXES MUST BE CHECKED

☐ This request included capital projects (s.o. 06700 OR 06700); a separate copy has been sent to the Chair, Capital improvement Advisory Committee.

☐ These funds have not been previously requested.

☐ These funds were previously requested by:
   ( ) Supplemental Appropriation or ( ) Budget Estimate and were
   ( ) reduced or ( ) denied by The Mayor, or The Board of Supervisors.

CERTIFIED AS TO FACTS AND AMOUNTS AS ABOVE STATED, AND

RECOMMENDED: [Signature] Lee (Department Head)

APPROVED: [Signature] (Board or Commission)

Recorded Controller’s Budget Division

By: __________________________ Date: __________________________ Request No. ____________

FOR MAYOR’S USE

To the Controller:

The above request meets with my approval; as indicated above. You are hereby requested to prepare the necessary appropriation ordinance.

APPROVED:
EDWIN M. LEE

BY: __________________________ DATE: 8-10-16

FORM 0.10 (revised 1/19/12)