

BUDGET APPROPRIATION INCREASE REQUESTAuditor Number B-16DEPARTMENT NAME PROBATIONDate: October 23, 2025

I am requesting an increase or decrease to my budget appropriations as listed below:

Check one ☐ "Previous Year Revenue"☒ "New Revenue"Funding Source Fund 581- Cal-AIM PATH 3

***Note General Fund and Public Safety "MUST" use Contingency when increasing budget

Increase Revenue Budget				Increase Expenditure Budget			
FUND DEPT NO	ACCOUNT NUMBER	ACCOUNT NAME	AMOUNT	FUND DEPT NO	ACCOUNT NUMBER	ACCOUNT NAME	AMOUNT
2036	4505724	Fund 581-CalAIM PATH 3	\$ 46,150.27	2002	59000	Contingency	\$ 46,150.27
2002	59000	Contingency	\$ 46,150.27	2036	53230	Professional Services	\$ 46,150.27
Total Journal			\$ 92,300.54	Total Journal			\$ 92,300.54

INCREASE / (DECREASE) APPROVED


 10/23/25
 SIGNATURE OF REQUESTING OFFICIAL DATE


 10/28/2025

AUDITOR

DATE

BOARD OF SUPERVISORS DATE

Vendor#: V000088

HEALTH MANAGEMENT ASSOCIATES, INC.

INVOICE

MA # 2024-378

2037-53230

46,150.27

Tehama County Probation Department
Att. Finance
PO Box 99
omorales@tcprobation.org
Red Bluff, CA 96080

October 14, 2025

Invoice Number: 211996 - 0000016

Due Date: November 13, 2025

Current Invoice Total	\$46,150.27
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Project: 211996 Tehama County: Medi-Cal DHCS

Professional Services from September 01, 2025 to September 30, 2025

Task: Probation

Professional and Consulting Services Rendered:

	Hours	Rate	Fees	
Perillo, Jessica	.50	330.00	165.00	
Qin, Xingyi	3.25	295.00	958.75	
VanDonge, Christine	20.50	330.00	6,765.00	
Volpe, John	24.75	420.00	10,395.00	
White, Julie	19.25	420.00	8,085.00	
Yermishkin, Anya	33.00	175.00	5,775.00	
Total Hours / Fees	101.25		32,143.75	
Subtotal Fees				32,143.75

Expenses for:

Gregory, Darlene				
8/8/2025	Gregory, Darlene	John Volpe - JFK-SFO split tasks	208.49	
8/28/2025	Gregory, Darlene	Julie White - BOS-SFO/SAN-BOS 2 Tasks	348.33	
8/28/2025	Gregory, Darlene	Julie White - SFO-SAN 2 Tasks	64.25	
8/29/2025	Gregory, Darlene	John Volpe - SAN-JFK updt'd Rtn, 2 tasks	10.50	
Subtotal Expenses			631.57	631.57

Task: Probation - Travel

2501 WOODLAKE CIRCLE, SUITE 100, OKEMOS, MI 48864
TELEPHONE: (517) 482-9236 FAX: (517) 482-0920
EMAIL: ACCOUNTING@HEALTHMANAGEMENT.COM • FEDERAL ID # 38-2590727

WWW.HEALTHMANAGEMENT.COM

Project	211996	Tehama County: Medi-Cal DHCS	Invoice	0000016
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Professional and Consulting Services Rendered:

	Hours	Rate	Fees	
VanDonge, Christine	15.75	213.00	3,354.75	
Volpe, John	12.50	265.00	3,312.50	
White, Julie	9.00	265.00	2,385.00	
Yermishkin, Anya	13.25	108.00	1,431.00	
Total Hours / Fees	50.50		10,483.25	
Subtotal Fees				10,483.25

Expenses for:

Gregory, Darlene				
8/13/2025	Gregory, Darlene	Anya Yermishkin - MSP-SFO split tasks	204.48	
8/13/2025	Gregory, Darlene	Christine VanDonge - CLT-SFO split task	302.99	
Volpe, John				
9/6/2025	Volpe, John	lunch during flight	14.00	
9/6/2025	Volpe, John	to airport in NY	50.92	
9/8/2025	Volpe, John	team meal	96.09	
9/8/2025	Volpe, John	one nigh of two divided by SO & Prob	163.69	
9/8/2025	Volpe, John	JV and JW	10.50	
9/8/2025	Volpe, John	Half of charge	380.44	
9/12/2025	Volpe, John	team coffee	20.25	
9/12/2025	Volpe, John	no receipt available - 50%	10.04	
9/18/2025	Volpe, John	from jfk -split with SO	5.70	
9/18/2025	Volpe, John	one night of this hotel bill	136.22	
Yermishkin, Anya				
9/11/2025	Yermishkin, Anya	Lunch for AY, JV, JW, & CVD	108.32	
9/12/2025	Yermishkin, Anya	Breakfast for AY, JV, JW, & CVD	35.24	
9/12/2025	Yermishkin, Anya	Dinner for AY & CVD	109.76	
9/12/2025	Yermishkin, Anya	SFO Marriott 09.12-09.13	253.87	
9/12/2025	Yermishkin, Anya	SFO Marriott 09.12-09.13	12.68	
9/12/2025	Yermishkin, Anya	Lunch for AY, JV, JW, & CVD	102.11	
VanDonge, Christine				
9/8/2025	VanDonge, Christine	park at CLT airport	129.60	
9/8/2025	VanDonge, Christine	RENTAL CAR 1/2	159.36	
		PROBATION 1/2 SHERIFF		
9/11/2025	VanDonge, Christine	hotel 1/2 PROBATION 1/2 SHERIFF	427.59	
9/12/2025	VanDonge, Christine	hotel 1/2 PROBATION 1/2 SHERIFF	126.93	
9/12/2025	VanDonge, Christine	Uber to hotel	30.92	
Subtotal Expenses			2,891.70	2,891.70

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Project	211996	Tehama County: Medi-Cal DHCS	Invoice	0000016
Current Invoice Total			\$46,150.27	

HMA's preferred method of payment is via ACH:

Bank of America
 Depository Account: Health Management Associates, Inc.
 Routing Number: 072000805
 Account Number: 375011515507
 Please send remittance notice to: accounting@healthmanagement.com