

**RECOMMENDED ACTION AND JUSTIFICATION:**

(Policy Item: Yes \_\_\_ No X)

Approve Budget Action transferring funds from Salaries to Office Expense and Equipment Under \$1,000 in the amount of \$750.

The County Administrative Officer position has been vacant since the beginning of the current fiscal year. The current work area for the Staff Analyst does not have sufficient work space for the type of job duties required of this position. A cost proposal for enlarging the work space has been submitted by California Business Furnishings which is the same company that provided the original office furniture.

Overall, there will be salary savings in the Administration budget this fiscal year.

**BACKGROUND AND HISTORY OF BOARD ACTIONS:**

None on this specific request.

**LIST ALTERNATIVES AND CONSEQUENCES OF NEGATIVE ACTION:**

- 1) Approve
- 2) Provide alternative direction

<p><b>COSTS:</b> ( ) Not Applicable</p> <p>A. Budgeted Current FY \$ 700</p> <p>B. Total Anticipated Costs \$ 1450</p> <p>C. Required Additional Funding \$ 750</p> <p>D. Internal Transfers \$ 750</p> <p><b>SOURCE:</b> ( ) 4/5ths Vote Required \$</p> <p>A. Unanticipated Revenues \$</p> <p>B. Reserve for Contingencies \$</p> <p>C. Source Description: _____</p> <p>Balance in Reserve for Contingencies, if approved: _____</p>	<p><b>SPECIAL INSTRUCTIONS:</b> List the attachments and number the pages consecutively: Budget Action</p> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>
<p><b>CLERKS USE ONLY:</b></p> <p>Res. No. <u>00-426</u> Ord. No. _____</p> <p>Vote - Ayes: <u>5</u> Noes: _____</p> <p>Absent: _____ Abstained: _____</p> <p><u>AMH</u> Approved ( ) Denied</p> <p>( ) Minute Order Attached ( ) No Action Necessary</p> <p>The foregoing instrument is a correct copy of the original on file in this office</p> <p>Date: _____</p> <p>ATTEST: _____</p> <p>MARGIE WILLIAMS, Clerk of the Board County of Mariposa, State of California</p> <p>BY: _____</p> <p>Deputy</p>	<p><b>ADMINISTRATIVE OFFICER'S RECOMMENDATION:</b> This item on agenda as:</p> <p><input checked="" type="checkbox"/> Recommended</p> <p><input type="checkbox"/> Not Recommended</p> <p><input type="checkbox"/> For Policy Determination</p> <p><input type="checkbox"/> Submitted with Comment</p> <p><input type="checkbox"/> Returned for Further Action</p> <p>Comment: _____</p> <p>CAO's Initials: <u>AMH</u></p>

## BUDGET ACTION FORM

FUND	DEPT/DIV	ACCOUNT	DESCRIPTION	PROJECT	INCREASE	DECREASE
001	0102-412	01.01	County Admin. Officer			\$750
001	0102-412	04.17	Office Expense		\$82	
001	0102-412	04.80	Equipment Under \$1,000		\$668	
001	0104	414-1090	GENERAL CONTINGENCY			
				<b>TOTAL</b>	\$750	\$750

TRANSFER BETWEEN FUNDS						
<b>TOTALS</b>					\$0	\$0

ACTION REQUESTED: (Check all that apply)

( ) Budget appropriation by Board of Supervisors (4/5ths Vote Required): Amending the total amount available in the county budget, or in any one fund of the budget , or appropriating Reserve for Contingencies;

( X ) Transfer by Board of Supervisors (3/5ths Vote Required): Moving existing appropriations from one budget another, or between categories within a budget unit;

JUSTIFICATION: Use salary savings to enlarge work space of Staff Analyst and purchase bookcase for CAO.

DEPT HEAD SIGNATURE <u>Mary B. Hodson</u>	DATE <u>11-30-00</u>
APPROVED BY RES NO. <u>00-426</u> CLERK <u>mmw</u>	DATE <u>12-12-00</u>

**ADMINISTRATION**

**AUDITOR'S USE ONLY**  
BA #