DEPARTMENT: Human Services  

RECOMMENDED ACTION AND JUSTIFICATION:
It is respectfully requested that your Board approve the attached budget action form to allow overtime to be paid within the eligibility unit ($10,000.00).

BACKGROUND AND HISTORY OF BOARD ACTIONS:
Please see attachment.

ALTERNATIVES AND CONSEQUENCES OF NEGATIVE ACTION:

Financial Impact? (X) Yes ( ) No  
Current FY Cost: $  
Budgeted In Current FY? ( ) Yes ( ) No (☑) Partially Funded
Amount in Budget: $60,750  
Additional Funding Needed: $10,000  
Annual Recurring Cost: $

Source:
Internal Transfer (☑)  
Unanticipated Revenue  
Transfer Between Funds  
Contingency  
( ) General  ( ) Other

List Attachments, number pages consecutively
Page 1 – Memo to the Board
Page 2 – Budget Action Form

CLERK'S USE ONLY:
Res. No.: 237  
Vote – Ayes: 5  
Absent:  
Noes:  

☑ Approved
( ) Minute Order Attached  ( ) No Action Necessary

The foregoing instrument is a correct copy of the original on file in this office.
Date:

Attest: MARGIE WILLIAMS, Clerk of the Board
County of Mariposa, State of California
By:
Deputy

COUNTY ADMINISTRATIVE OFFICER:
☑ Requested Action Recommended
( ) No Opinion
Comments:

CAO: [Signature]
May 1, 2009

TO: Members, Board of Supervisors
    Rick Benson, CAO
From: James Rydingsword, Director
RE: Overtime Request for Eligibility Unit in Human Services Department

Recommendation
It is respectfully requested that your Board approve the attached budget action form to allow overtime to be paid within the Eligibility Unit.

Background/Current Situation
The Human Services Department has seen an increase in the number of applications being made for public assistance. This increase in workload will require the eligibility unit to work overtime hours to meet the timeline required for determining eligibility for public assistance programs. A budget action is necessary to fund the needed overtime.

Financial
The attached budget action form moves $10,000 from salary savings to the overtime line to allow for overtime to be granted to the Eligibility Unit within budget unit 001-0528. There is no impact to the general fund.
### BUDGET ACTION FORM

<table>
<thead>
<tr>
<th>FUND</th>
<th>DEP/DIV</th>
<th>ACCOUNT</th>
<th>DESCRIPTION</th>
<th>PROJECT</th>
<th>INCREASE</th>
<th>DECREASE</th>
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</thead>
<tbody>
<tr>
<td>001</td>
<td>0528</td>
<td>677.0130</td>
<td>Social Worker I-IV</td>
<td></td>
<td>10,000</td>
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<tr>
<td>001</td>
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<td>677.0230</td>
<td>Overtime</td>
<td></td>
<td>10,000</td>
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</tbody>
</table>

**TOTALS**

<table>
<thead>
<tr>
<th>DEBIT</th>
<th>CREDIT</th>
</tr>
</thead>
</table>

**TRANSFER BETWEEN FUNDS**

**TOTALS**

**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 transferring appropriation from Contingencies

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

**JUSTIFICATION** To allow for overtime in eligibility unit.

**DEPT HEAD SIGNATURE**

**DATE** 4-29-09

**APPROVED BY RES NO.**

**CLERK**

**DATE** 5-26-09

**DEPARTMENT** Human Services - Employment & Community Services Division

**AUDITOR'S USE ONLY**

**BA #**

Budget Revision Form Revised 07/2000