DEPARTMENT: Human Services  

BY: Cheryle Rutherford-Kelly  
PHONE: 966-2000

RECOMMENDED ACTION AND JUSTIFICATION:

It is respectfully recommended that your Board: (1) permit this Department to continue to contract with Kathy Albright for fiscal assistance; and (2) authorize your Chairman to sign the contract.

BACKGROUND AND HISTORY OF BOARD ACTIONS:

Please see attachment.

ALTERNATIVES AND CONSEQUENCES OF NEGATIVE ACTION:

Please see attachment.

<table>
<thead>
<tr>
<th>Financial Impact?</th>
<th>Yes</th>
<th>No</th>
<th>Current FY Cost: $</th>
<th>Annual Recurring Cost: $</th>
</tr>
</thead>
<tbody>
<tr>
<td>Budgeted In Current FY?</td>
<td>Yes</td>
<td>No</td>
<td>Partially Funded</td>
<td></td>
</tr>
<tr>
<td>Amount in Budget:</td>
<td>$</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Additional Funding Needed:</td>
<td>$</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Source:  
- Internal Transfer  
- Unanticipated Revenue: 4/5's vote  
- Transfer Between Funds: 4/5's vote  
- Contingency: 4/5's vote  
- General  
- Other

CLERK'S USE ONLY:

Res. No.:  
Ord. No.  
Vote - Ayes:  
Noes:  
Absent:  
Approved  
Minute Order Attached  
No Action Necessary

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

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: