DEPARTMENT: Treasurer – Tax Collector
BY: Marjorie J. Wass
PHONE: 966-2621

RECOMMENDED ACTION AND JUSTIFICATION:

Transfer $3,500 from Tax Collectors Trust to cover unanticipated publication costs.

Due to a greater number of delinquent accounts than the previous year, publication costs were doubled. This cost is recovered when the account is redeemed.

BACKGROUND AND HISTORY OF BOARD ACTIONS:

The Board has previously approved transfers for unanticipated costs.

ALTERNATIVES AND CONSEQUENCES OF NEGATIVE ACTION:

Denying the request would result in an unpaid billing and the ability to comply with future publication requirements.

Financial Impact? (X) Yes ( ) No
Budgeted In Current FY? ( ) Yes ( ) No ( ) Partially Funded
Amount in Budget: $240
Additional Funding Needed: $3500

List Attachments, number pages consecutively

Budget Action Form

SOURCE:
Internal Transfer
Unanticipated Revenue
4/5's vote
Transfer Between Funds
X 4/5's vote
Contingency
4/5's vote
( ) General ( ) Other

CLERK’S USE ONLY:
Res. No.: 03-336 Ord. No. _____
Vote – Ayes: S Noes: _____
Absent: _____
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:
\(\checkmark\) Requested Action Recommended
\(\checkmark\) No Opinion
Comments:

CAO:  

Revised Dec. 2002
### BUDGET ACTION FORM

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**TOTALS:** 0

### TRANSFER BETWEEN FUNDS

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**TOTALS:** 3500 3500

**ACTION REQUESTED:** (Check all that apply)

(I) 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

( ) 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 cover greater than anticipated publication costs

**DEPT HEAD SIGNATURE**

Keith Williams, For JMW  
**DATE** 9-15-03

**APPROVED BY RES NO.** 03-336  
**CLERK**  
**DATE** 9-23-03

**AUDITOR'S USE ONLY**

**BA #**

**DEPARTMENT**

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FormBas  
**Budget Revision Form Revised 07/2000**