DEPARTMENT: Human Services  
BY: Cheryle Rutherford-Kelly

RECOMMENDED ACTION AND JUSTIFICATION:
It is respectfully requested that your board authorize the transfer $800 of salary savings in the Mental Health budget, line 001-0402-622.01-03, to Training & Seminars, line 001-0402-622.04-90, to cover the increase in costs.

Additional funding is needed in the Training & Seminars line item due to an unexpected increase in Mental Health meetings in Sacramento due to the State's budget crisis. Salary savings is available because the Deputy Director of Behavioral Health position is vacant.

BACKGROUND AND HISTORY OF BOARD ACTIONS:

ALTERNATIVES AND CONSEQUENCES OF NEGATIVE ACTION:

Financial Impact? □ Yes □ No  Current FY Cost: $  
Budgeted In Current FY? □ Yes □ No ( ) Partially Funded  
Amount in Budget: $  
Additional Funding Needed: $  
Source: 
Internal Transfer X  
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.: 03-19  
Vote – Ayes: 5  
Absent:  
( □ ) 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:
## BUDGET ACTION FORM

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<th>ACCOUNT</th>
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### TRANSFER BETWEEN FUNDS

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### TOTALS

| 800 | 800 |

**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** Salary savings to be used for training and seminar costs.

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**DEPT HEAD SIGNATURE**

**DATE 3-31-03**

**APPROVED BY RES NO.**

**DATE 4-22-03**

**DEPARTMENT**

**AUDITOR’S USE ONLY**

**BA #**

Budget Revision Form Revised 07/2000