DEPARTMENT: Public Works
BY: Marty Allan
PHONE: 966-5356

RECOMMENDED ACTION AND JUSTIFICATION: (Policy Item: Yes___ No_X___)

Authorize Budget Action appropriating unanticipated revenue received for CPR/First Aid training donated by staff for use in purchasing CPR/First Aid supplies ($379).

Joe Cardoso, a certified CPR/First Aid instructor has donated money received from training outside department fees for materials to be used to replenish supplies originally purchased for training.

BACKGROUND AND HISTORY OF BOARD ACTIONS:

No previous Board action on this item.

The Board routinely approves unanticipated revenue to be added to a budget.

LIST ALTERNATIVES AND CONSEQUENCES OF NEGATIVE ACTION:

N/A

COSTS: ( ) Not Applicable
A. Budgeted current FY $ 0
B. Total anticipated costs $ 379
C. Required additional funding $ 0
D. Internal transfers $ 0

SOURCE: (X) 4/5ths Vote Required
A. Unanticipated revenues $ 379
B. Reserve for contingencies $ 0
C. Source description: Balance in Reserve for Contingencies, if approved:

SPECIAL INSTRUCTIONS: List the attachments and number the pages consecutively:
1. Budget Action Form

CLERK’S USE ONLY: Res. No.: 332-122
Ord. No.: 0
Vote - Ayes: ____________ Noes: ____________
Absent: ____________ Approved: ____________ Denied: ____________
( ) 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’S RECOMMENDATION: This item on agenda as:
__________ Recommended
__________ Not Recommended
__________ For Policy Determination
__________ Submitted with Comment
__________ Returned for Further Action

Comment:

C.A.O. Initials: ____________

Action Form Revised 5/92
# BUDGET ACTION FORM

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<th>DESCRIPTION</th>
<th>PROJECT</th>
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<td>308-1129</td>
<td>CPR/First Aid Fees</td>
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<td>(379)</td>
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<td>583-0440</td>
<td>CPR/First Aid Supplies</td>
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## TRANSFER BETWEEN FUNDS

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<td>414-1090</td>
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**TOTAL**

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**TOTAL**

0 0

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

- (X) 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;

- ( ) 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:** See attached Board item.

**DEPT HEAD SIGNATURE**

**DATE** 4/16/02

**APPROVED BY RES NO.** 030-30

**CLERK**

**DATE** 5/2/02

**0304-PUBLIC WORKS ADMIN.**

**AUDITOR’S USE ONLY**

**BA#**

Budget Revision Form Revised 11/95

Attachment 1

04/12/02 02:14:30 PM V:\users\dajanm\wb3\BUDACTIN wb3