RECOMMENDED ACTION AND JUSTIFICATION: (Policy Item: Yes No)

Appropriate $1,133 in Area 12 Agency on Aging Grant Funds ($312 in one-time-only funds and $812 in additional Grant Funds) into the Senior Nutrition Services Budget. The one-time-only funds are granted only for the purpose of purchasing a stem caster cart with wire shelves for the Senior Nutrition Services Division. I am requesting that the $812 be budgeted in the utilities line item.

BACKGROUND AND HISTORY OF BOARD ACTIONS:

Board has approved similar actions in the past.

LIST ALTERNATIVES AND CONSEQUENCES OF NEGATIVE ACTION:

Appropriate the funds.
Do not appropriate the funds and return the money to Area 12 Agency on Aging for granting to another Area 12 provider.
DEPT/DIV: Senior Nutrition Svcs  CONTACT: Jim Eutsler
DATE: June 14, 1994  PHONE: 966-3696

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;

( ) Transfer by Administrator: Moving existing appropriations within a single budget category between line items (i.e. services and supplies, etc.)

( ) Transfer by Auditor: Moving salaries between line items to accommodate variances internal to salaries; OR transfers within the County budget under $50.00 to accommodate minor variations from the budget.

<table>
<thead>
<tr>
<th>FUND/DEPT/ACCT NO.</th>
<th>LINE ITEM DESCRIPTION</th>
<th>AMOUNT (FROM)/TO</th>
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<tbody>
<tr>
<td>050-7105-305-6241</td>
<td>A12AA Grant</td>
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<tr>
<td>050-0518-715-1090</td>
<td>Contingency</td>
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<td>050-0518-715-1090</td>
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<tr>
<td>050-0518-715-0677</td>
<td>Fixed Assets (Cart)</td>
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<tr>
<td>050-0518-715-0460</td>
<td>Utilities</td>
<td>821</td>
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</table>

Justification: Unanticipated grant funds and one-time-only grant funds for a specific purchase.

Department Head Signature: [Signature]  Date: 6-7-94

Approved By: Res. No. 94-222  Clerk: [Signature]  Date: 6-14-94

AUDITOR'S USE ONLY:

Transfer No.:

B.R. No.:

Budget Action Form Revised 5/92