

MARIPOSA COUNTY
BOARD OF SUPERVISORS

AGENDA
ACTION FORM

DATE: July 7, 1992
AGENDA ITEM NO: CA 7

HOUSING AND COMMUNITY DEVELOPMENT AGENCY
BY: James F. Evans

PHONE: 966-6121

RECOMMENDED ACTION AND JUSTIFICATION: (POLICY ITEM: YES___ NO_X_)

Resolution amending the existing agreement with the Mariposa County Arts Council, Inc to invoice the County for \$6,000 in additional expenses regarding the ARTSCAMP summer program. (Previous Board direction and at the request of the Auditor-Recorder).

BACKGROUND AND HISTORY OF BOARD ACTIONS:

The Board approved (Res. 92-365) a supplemental grant request from the MCAI for \$6,000 to operate the ARTSCAMP summer program. Due to the close of FY 91/92, it was impossible to make the appropriate budget transfers. Therefore, it is necessary to request authorization for MCAI to invoice the FY 92/93 agreement for the additional expenses and adjust the agreement terms during the upcoming budget hearings.

LIST ALTERNATIVES AND CONSEQUENCES OF NEGATIVE ACTION.

There are no alternatives and negative action will negate previous action.

COSTS: () Not Applicable
A. Budgeted current FY \$ 30,000
B. Total anticipated costs \$ 36,000
C. Required Add'l funding \$ 6,000
D. Source: FY 91/92 carryover

SPECIAL INSTRUCTIONS:
List the attachments and number pages accordingly:

SOURCE: () 4/5ths vote required
A. Internal transfers \$ _____
B. Unanticipated revenues \$ _____
C. Reserve for contingency \$ _____
D. Description: _____

Balance in Reserve for Contingencies, if approved: \$ _____

CLERK'S USE ONLY:
Resolution No.: 92-379
Ordinance No.: _____
Vote - Ayes: 5 Noes: _____
Absent: _____ Abstain: _____
MW Approved () Denied
() Minute Order Attached

ADMINISTRATIVE OFFICER'S RECOMMENDATION:
This item on agenda as:
 Recommended
 Not Recommended
 Policy Determination
 Submitted w/ Comment
 Returned for further action

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

Date: _____
Attest: MARGIE WILLIAMS
Clerk of the Board of Supervisors
County of Mariposa, State of CA
By: _____
Deputy Clerk of the Board

Comment: _____

A.O. Initials: [Signature]