MARIPOSA COUNTY
BOARD OF SUPERVISORS
AGENDA ACTION FORM
DATE: 2/12/91
AGENDA ITEM NO.: NA

DEPARTMENT: BY: PHONE:
Public Health C. B. Mosher, MD, Health Officer 966-3689
RECOMMENDED ACTION AND JUSTIFICATION: (Policy Item: Yes _ No X_)
Recommend resolution transferring money in Tobacco Cessation Program for a computer
monitor ($504.69). The purchase has been approved by the State oversight office, it
is needed for budget and program activity on the computer, and all the funds are from
the State grant.

BACKGROUND AND HISTORY OF BOARD ACTIONS: On May 22, 1990, the Board approved
the purchase of computer equipment from EdTech which included a color monitor. At that
time, we included in the narrative portion of the discussion the purchase of a color
monitor. However, paperwork included the description for a monochrome monitor rather
than a color monitor which was actually ordered. We received the color monitor as ordered
and the Auditor will not process the payment until the paperwork is corrected. This item
LIST ALTERNATIVES AND CONSEQUENCES OF NEGATIVE ACTION: corrects that oversight.

1. Purchase monitor with General Fund monies.
2. Refuse to pay vendor for ordered equipment.

COSTS: ( ) Not Applicable
A. Budgeted current FY $ 504.69
B. Total anticipated costs $ 504.69
C. Required Add'l funding $ 0
D. Source: _______________________________

SOURCE: ( ) 4/5ths Vote Required
A. Internal transfers $504.69
B. Unanticipated revenues $_____________
C. Reserve for contingency $_____________
D. Description: ___________________________________________________________________
Balance in Reserve for Contingencies,
if approved: $_____________

SPECIAL INSTRUCTIONS:
List the attachments and number
the pages consecutively:

CLERK'S USE ONLY:
Res. No.: 91-58
Ord. No.:_____
Vote - Ayes: 5 Noes: _
Absent: ______ Abstained: ______
Approved ( ) Denied ( ) Minute Order Attached

ADMINISTRATIVE OFFICER'S
RECOMMENDATION:
This item on agenda as:

☐ Recommended
☐ Not Recommended
☐ For Policy Determination
☐ Submitted with 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

Comment: _______________________

A.O. Initials: [__]

Action Form Revised 12/89
BE IT RESOLVED by the Board of Supervisors of Mariposa County, a political subdivision of the State of California, that pursuant to the provisions of the Government Code of the State of California, Sections 29120 et seq., the following APPROPRIATIONS and/or TRANSFERS within the Budget of the County of Mariposa are hereby adopted:

### APPROPRIATIONS (4/5ths Vote Required)

<table>
<thead>
<tr>
<th>Department</th>
<th>Item</th>
<th>Account No.</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>

### TRANSFERS (3/5ths Vote Required)

<table>
<thead>
<tr>
<th>Department</th>
<th>Item</th>
<th>Account No.</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health Department</td>
<td>SpDp/Tobacco Cessation</td>
<td>001-450-2-234</td>
<td>$504.69</td>
</tr>
<tr>
<td>Health Department</td>
<td>Fixed Asset</td>
<td>001-450-4-403</td>
<td>$504.69</td>
</tr>
</tbody>
</table>