

MARIPOSA COUNTY
BOARD OF SUPERVISORS

AGENDA
ACTION FORM

DATE: August 27, 1991
AGENDA ITEM NO. RA-11

DEPT.: COUNTY COUNSEL

BY: JEFFREY G. GREEN

PHONE: 966-3625

RECOMMENDED ACTION AND JUSTIFICATION: (Policy Item: Yes _____ No X)
Pass and adopt this Resolution authorizing Chairman to sign order of the Board to reject Claim No. C91-10 which was filed with this Board on August 9, 1991. Claimants did not indicate a dollar amount, however, they contend injuries and damages were sustained resulting from a vehicle/motorcycle accident.

BACKGROUND AND HISTORY OF BOARD ACTIONS:
The Board usually follows the recommendation of Counsel in these matters.

LIST ALTERNATIVES AND CONSEQUENCES OF NEGATIVE ACTION:
Claim would automatically be denied if no action was taken.

COST: () Not Applicable
A. Budgeted current FY \$ _____
B. Total anticipated costs \$ _____
C. Required add'l funding \$ _____
D. Source: _____

SPECIAL INSTRUCTIONS:
List the attachments and number the pages consecutively:
Claim No. C91-10 and
Notice of Rejection

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. 91-400
Ordinance No. _____
Vote: Ayes: 5 Noes: _____
Absent: _____ Abstained: _____
hws Approved () Denied
() Minute Order Attached

ADMINISTRATIVE OFFICER'S RECOMMENDATION:
This item on agenda as:
X 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 Calif.
By: _____
Deputy

Comment: _____

A.O. Initials: [Signature]