

MARIPOSA COUNTY  
BOARD OF SUPERVISORS

AGENDA  
ACTION FORM

DATE: August 27, 1991  
AGENDA ITEM NO. RA-13

DEPT.: COUNTY COUNSEL

BY: JEFFREY G. GREEN

PHONE: 966-3625

RECOMMENDED ACTION AND JUSTIFICATION: (Policy Item: Yes \_\_\_ No X)

Pass and adopt this Resolution approving Claim No. C91-12 in the sum of \$695.36 for repair to a vehicle's right rear door damaged by a County vehicle. Additionally authorize the Auditor to draw a warrant in the amount of \$695.36 to be forwarded to Counsel's office for processing to claimant.

Based upon the motor vehicle accident/incident report submitted by the County employee, it appears that this is a reasonable claim and the County does have some liability in this matter.

BACKGROUND AND HISTORY OF BOARD ACTIONS:

The Board usually approves repairs on vehicles damaged by County equipment/vehicles if there appears to be a reasonable claim.

LIST ALTERNATIVES AND CONSEQUENCES OF NEGATIVE ACTION:

Claimant would not be reimbursed for cost of repairs.

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. C91-12 with attached estimates.

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. 91-401  
Ordinance No. \_\_\_\_\_  
Vote: Ayes: 5 Noes: \_\_\_\_\_  
Absent: \_\_\_\_\_ Abstained: \_\_\_\_\_  
None 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]