RECOMMENDED ACTION AND JUSTIFICATION: (Policy Item: Yes ___ No X )
Pass and adopt this Resolution authorizing the Chairman to sign the Lease Agreement attached hereto with D. J. Johnston for premises housing the Victim/Witness Program in Mariposa County. The Merced District Attorney Victim/Witness Program had provided support services to victims of crime in Mariposa County since January, 1990. Mariposa County now has its own Victim/Witness Program and a facility to conduct business is necessary to accommodate this program.

BACKGROUND AND HISTORY OF BOARD ACTIONS:
In the past, the Board has approved similar Lease Agreements with other individuals. This is the first Agreement with this individual for these premises.

LIST ALTERNATIVES AND CONSEQUENCES OF NEGATIVE ACTION:
Do not approve — another location for the Mariposa County Victim/Witness Program would have to be found.

COST: ( ) Not Applicable
A. Budgeted current FY $_________
B. Total anticipated costs $_________
C. Required add’l funding $_________
D. Source: ______________________

SOURCE: ( ) 4/5ths Vote Required
A. Internal transfers $_________
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:
Lease Agreement

CLERK’S USE ONLY:
Resolution No. 91-480
Ordinance No. 91-________
Vote: Ayes: 5 Noes: ________
 Absent: _____ Abstained: _______
Approved ( ) Denied ( )
Minute Order Attached

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

ADMINISTRATIVE OFFICER’S RECOMMENDATION:
This item on agenda as:
X Recommended
Not Recommended
___ For Policy Determination
___ Submitted with Comment
___ Returned for Further Action

Comment: ______________________
A.O. Initials: __________

Action Form Revised 12/89