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

Recommend resolution authorizing Chairman to sign Personal Service Agreement with Linda Brochini. Due to the sudden resignation of the Health Department's Clinic Nurse, the Health Officer had to choose between bringing on a nurse under a Personal Services Agreement while the recruitment process took place, or cancelling clinics (including pre-employment exams) until then. It is recommended that this temporary Agreement be signed to maintain services and approve transfer within 6/1, 500.00.

BACKGROUND AND HISTORY OF BOARD ACTIONS:

N/A

LIST ALTERNATIVES AND CONSEQUENCES OF NEGATIVE ACTION:

Cancel Health Department Clinics until recruitment process is complete.

COSTS: ( ) Not Applicable
A. Budgeted current FY $13,000
B. Total anticipated costs $1,500
C. Required Add'l funding $0
D. Source:

SOURCE: ( ) 4/5ths Vote Required
A. Internal transfers $1,500
B. Unanticipated revenues $0
C. Reserve for contingency $0
D. Description:
Balance in Reserve for Contingencies, if approved: $0

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

CLERK'S USE ONLY:
Res. No.: 91-448
Ord. No.: ______
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 CA
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: JGW

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>
</table>

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

<table>
<thead>
<tr>
<th>From: Health Department</th>
<th>Item</th>
<th>Account No.</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health Department</td>
<td>Clinic Extra Help</td>
<td>001-450-1-102</td>
<td>$1,500</td>
</tr>
<tr>
<td>Health Department</td>
<td>Personal Services</td>
<td>001-450-2-180</td>
<td>$1,500</td>
</tr>
</tbody>
</table>