RECOMMENDED ACTION AND JUSTIFICATION: (Policy Item: Yes___ NoXX_)
AUTHORIZE THE SHERIFF TO PURCHASE AND WAIVE THE FORMAL BID PROCESS TO ENABLE
THE DEPARTMENT TO BUY THE UNDERCOVER VEHICLE FOR USE IN THE DCJF GRANT. THE
FUNDING FOR THE EQUIPPED VEHICLE COMES FROM THE APPROVED GRANT. THE VEHICLE
WOULD BE PURCHASED FROM HERTZ USED CAR SALES AT A COST OF $12,510.00.

BACKGROUND AND HISTORY OF BOARD ACTIONS:
THE BOARD HAS AUTHORIZED SIMILAR REQUESTS IN THE PAST

LIST ALTERNATIVES AND CONSEQUENCES OF NEGATIVE ACTION:
NONE. DO NOT TAKE ADVANTAGE OF GRANT FUNDS. DO NOT TAKE ADVANTAGE OF THE
"USED CAR PRICES OFFERED GOVERNMENT BY HERTZ"

COSTS: ( ) Not Applicable
A. Budgeted current FY $________
B. Total anticipated costs $________
C. Requires 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 Contingency if approved: $________

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

CLERK'S USE ONLY:
Res. No.: 91-441
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
County of Mariposa, State of Ca.
By: __________________________
Deputy

ADMINISTRATIVE OFFICER'S RECOMMENDATION:
This item on the agenda as: ____________
Recommended
Not Recommended
For Policy Determination
Submitted with comment
Returned for Further Action

Comment: _______________________________________________________________________

A. O. Initials: ____________________

Action Form Revised 12/87