RECOMMENDED ACTION AND JUSTIFICATION:
If the Board approves the specific use of the Special District Augmentation Fund balance as proposed by the Hospital, direct that the funds be released to the Hospital conditional upon the ambulance being fully funded through the remainder of the 1989/90 fiscal year.

BACKGROUND AND HISTORY OF BOARD ACTIONS:
The Board has previously directed that the $17,503 in the Special District Augmentation Fund be utilized for items as requested by the Hospital in the attached memo and approved by the Board of Supervisors.

LIST ALTERNATIVES AND CONSEQUENCES OF NEGATIVE ACTION:
1. Approve the specific use of Special District Augmentation Funds as outlined.
2. Approve other uses for Special District Augmentation Funds.

COSTS: ( ) Not Applicable
A. Budgeted current FY $17,503
B. Total anticipated costs $17,503
C. Required add'l funding $-0-
D. Source: Special Dist Augmentation Fund

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:
Correspondence from Hospital

CLERK'S USE ONLY:
Res. No.: 90-232
Ord. No.: 
Vote - Ayes: 5 Noes: 
Absent: Abstained:
( ) Approved ( ) Denied
(×) Minutes 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 agenda as:
Recommended
Not Recommended
For Policy Determination
Submitted With Comment
Returned for Further Action
Comment:

A.O. Initials: 

Action Form Revised 12/89