Dated: 9-19-89

( ) Minute Order Attached
( ) Dated
( ) Approved
( ) Denied

Abstained:

Notes:

Yes: __________
No: __________

Ct. No.: ___
Res. No.: ___

Approval:

Balance in Reserve for Contingencies, $ __________

D. Resolution:

C. Reserve for Contingency $ __________

B. Unappropriated Revenues $ __________

A. Internal Transfers $ __________

SOURCE: ( ) 4/5ths Vote Required

Approved: __________

D. Source:

C. Requested Add'l Funding $ __________

B. Total Appropriated Costs $ __________

A. Budgeted Current $ __________

( ) Not Applicable

Costs: __________

Recommend as Recommended.

Refer to a Committee.

Take no action and policy would remain as it is presently.

List Alternatives and Consequences of Negative Action:

Present board policy does not allow for reimbursement of tips.

Background and History of Board Actions:

Claims, allowing for reimbursement for a maximum of 15% tip for meals.

Recommend Action and Justification:

Department: Board

By: Bagget

Phone: 966-2006

Agenda Item No.: 24

Mariposa County

Agenda Action Form 6-15-89

By:

County of Mariposa, State of CA

Title in this office.

Correct copy of the original on

The foregoing instrument is a

attachment.