

DEPARTMENT: Human Services

BY: James Rydingsword  
PHONE: 966-2000

**RECOMMENDED ACTION AND JUSTIFICATION:**

It is respectfully requested that your board approve the attached budget action transferring between categories budget amounts totaling \$27,459 to cover Extra Help, Overtime and Out of Class Pay.

Overtime is higher than anticipated due to the change in computer systems from ISAWS to C-IV. Staff was required to work overtime to verify data and attend trainings.

Extra Help is higher than anticipated due to the departments' position consolidation efforts to support the new building lease costs. Positions that are currently filled with extra help staff will be vacated during the transition to the new building.

Out of class pay is higher than originally calculated due to mis-calculations in payroll projections at the beginning of the fiscal year.

**BACKGROUND AND HISTORY OF BOARD ACTIONS:**

Your board usually approves year end budget adjustments to cover expenses that are higher than anticipated.

**ALTERNATIVES AND CONSEQUENCES OF NEGATIVE ACTION:**

Should this action not be approved the Auditor's office would be required to make journal entries during final audits.

Financial Impact? ( ) Yes (X) No	Current FY Cost: \$	Annual Recurring Cost: \$
Budgeted In Current FY? (X) Yes ( ) No ( ) Partially Funded		
Amount in Budget: \$3,450,767		List Attachments, number pages consecutively
Additional Funding Needed: \$		Budget Action page 1
Source:		
Internal Transfer	X	
Unanticipated Revenue		4/5's vote
Transfer Between Funds		4/5's vote
Contingency		4/5's vote
( ) General ( ) Other		

**CLERK'S USE ONLY:**

Res. No.: 10-291 Ord. No. \_\_\_\_\_  
 Vote - Ayes: 5 Noes: \_\_\_\_\_  
 Absent: \_\_\_\_\_  
 Approved \_\_\_\_\_  
 ( ) Minute Order Attached ( ) No Action Necessary

**COUNTY ADMINISTRATIVE OFFICER:**

Requested Action Recommended  
 No Opinion  
 Comments: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

The foregoing instrument is a correct copy of the original on file in this office.

Date: \_\_\_\_\_  
 Attest: MARGIE WILLIAMS, Clerk of the Board  
 County of Mariposa, State of California

By: \_\_\_\_\_  
 Deputy

CAO: 

