

DEPARTMENT: Sheriff

BY: Brian Muller
PHONE: 966-3615

RECOMMENDED ACTION AND JUSTIFICATION: Request approval to make a (\$5,000) budget transfer from the "Jail - Medical & Laboratory" line item to the "Jail - Household / Janitorial" line item.

Due to a change in account billing, the Jail's "Household / Janitorial Expense" line item will exceed the amount budgeted for fiscal year 2007-2008. The shortage is a direct result of a change in account billing within the sheriff's office. In past years all refuse fees were paid out of the "Utilities Expense" line item. When the 2007/2008 budget was submitted the costs associated with refuse disposal were included in the "Utilities Expense" line item. As the refuse fees were received, office staff paid the refuse costs from the "Household / Janitorial Expense" line item rather than the "Utilities Expense" line item.

There is currently sufficient savings within the "Jail - Medical & Laboratory" line item to allow for the requested transfer of funds.

BACKGROUND AND HISTORY OF BOARD ACTIONS: Similar requests have been approved in the past.

ALTERNATIVES AND CONSEQUENCES OF NEGATIVE ACTION: If the request is not approved, the necessary adjustments will have to be made at the end of the fiscal year.

Financial Impact? <input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	Current FY Cost: \$	Annual Recurring Cost: \$0
Budgeted In Current FY? <input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Partially Funded	
Amount in Budget:	<u>312,000</u>		
Additional Funding Needed:	<u>5,000</u>		<u>Budget Action Form</u>
Source			
Internal Transfer	<input checked="" type="checkbox"/>		
Unanticipated Revenue	<input type="checkbox"/>	4/5's Vote	
Transfer Between Funds	<input type="checkbox"/>	4/5's Vote	
Contingency	<input type="checkbox"/>	4/5's Vote	
<input type="checkbox"/> General <input type="checkbox"/> Other			

CLERK'S USE ONLY:

Res. No. 08-18 Ord. No. _____
Vote - Ayes: 4 Noes: _____
Absent: Edby
 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: [Signature]

BUDGET ACTION FORM

FUND	DEP/DIV	ACCOUNT	DESCRIPTION	PROJECT	INCREASE	DECREASE
001	0220	531.04-09	Jail - Household / Janitorial		5,000	
001	0220	531.04-14	Jail - Medical & Laboratory			5,000
001	0104-414	1090	GENERAL CONTINGENCY			
TOTALS					5,000	5,000

TRANSFER BETWEEN FUNDS					DEBIT	CREDIT
TOTALS						

ACTION REQUESTED: (Check all that apply)

- () Budget appropriation by Board of Supervisors (4/5ths Vote Required): Amending the total amount available in the county budget, or in any one fund of the budget , or transferring appropriation from Contingencies

- (X) Transfer by Board of Supervisors (3/5ths Vote Required): Moving existing appropriations from one budget to another, or between categories within a budget unit;

JUSTIFICATION Refer To Attached Board Agenda Item Explanation

exceeded.

DEPT HEAD SIGNATURE *Brian Muller*

DATE *4-14-08*

APPROVED BY RES NO. *08-168*

CLERK *[Signature]*

DATE *5-6-08*

DEPARTMENT: Sheriff's Office

AUDITOR'S USE ONLY
BA #