DEPARTMENT: Community Services/Transit Service  BY: Mary E. Williams  PHONE: 966-5315

RECOMMENDED ACTION AND JUSTIFICATION: Request the Board of Supervisors approval to purchase a replacement Van. Medical Transportation Van VT17, mileage 131,912, needs transmission replaced. At the present time the Medical Transportation program has only one Van and a small loaner car from Public Works, therefore would also like to request waiver on the three bid requirement due to immediate need and the other medical vehicles are Chevrolet Venture Vans. Funds are in the current Transit Budget. If request is approved, Public Works would like permission to dispose VT17 at auction.

BACKGROUND AND HISTORY OF BOARD ACTIONS: Historically the Board has approved the purchase of vans or busses if the funding is in the current year’s budget.

ALTERNATIVES AND CONSEQUENCES OF NEGATIVE ACTION: Continue to use Public Works small loaner car that is not adequate for medical transportation. Some of the seniors are not able to get in or out of the smaller vehicles, so would not be able to transport them.

Financial Impact? (X) Yes  ( ) No  Current FY Cost: $  Annual Recurring Cost: $
Budgeted in Current FY? ( ) Yes  (X) No  ( ) Partially Funded
Amount in Budget: $49,977
Additional Funding Needed: $29,922

Source:
Internal Transfer
Unanticipated Revenue
Transfer Between Funds
Contingency
( ) General  ( ) Other

Budget Action

List Attachments, number pages consecutively

CLERK’S USE ONLY:
Res. No.: 2-44  Ord. No. _____
Vote – Ayes: 5  Noes: _____
Absent: _____
Approved
( ) Minute Order Attached  ( ) No Action Necessary

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

COUNTY ADMINISTRATIVE OFFICER:
( ) Requested Action Recommended
( ) No Opinion
Comments:

CAO: ________________________________
# BUDGET ACTION FORM

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<th>FUND</th>
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<th>ACCOUNT</th>
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**TOTALS** | 29,922 | 29,922 |

## TRANSFER BETWEEN FUNDS

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**TOTALS** | 0 | 0 |

**ACTION REQUESTED:**

( ) 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

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

**To appropriate funds to replace van.**

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**DEPT HEAD SIGNATURE**

Mary E. Williams

**DATE** 1-26-07

**APPROVED BY RES NO.**

02.46

**CLERK**

1009

**DATE** 2-6-07

**TRANSPORT DEPARTMENT**

AUDITOR'S USE ONLY

BA #

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Budget Revision Form Revised 07/2000