DEPARTMENT: Human Services/BHS

BY: Cheryle Rutherford-Kelly
PHONE: 966-2442

RECOMMENDED ACTION AND JUSTIFICATION:

It is respectfully requested that your Board: (1) approve a Behavioral Health lease for a computer server necessary to conduct business; (2) allow the buyout of two desk top computers; and (3) authorize your Chairman to sign the lease and Certificate of Incumbency and Authority.

BACKGROUND AND HISTORY OF BOARD ACTIONS:

Please see attachment.

ALTERNATIVES AND CONSEQUENCES OF NEGATIVE ACTION:

Please see attachment.

Financial Impact? ( ) Yes (X) No
Budgeted In Current FY? ( ) Yes ( ) No ( ) Partially Funded

Amount in Budget: $
Additional Funding Needed: $

Source:

<table>
<thead>
<tr>
<th>Internal Transfer</th>
<th>External Transfer</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unanticipated Revenue</td>
<td>4/5's vote</td>
</tr>
<tr>
<td>Transfer Between Funds</td>
<td>4/5's vote</td>
</tr>
<tr>
<td>Contingency</td>
<td>4/5's vote</td>
</tr>
</tbody>
</table>

( ) General ( ) Other

List Attachments, number pages consecutively
Board Memo, Page 1
Assignment and Assumption of Lease, Page 2 & 3
Certificate of Incumbency & Authority, Page 4 & 5
Claim Form, Page 6

CLERK’S USE ONLY:

Res. No.
Vote – Ayes:
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: ____________________________
September 29, 2004

TO: Members, Board of Supervisors
    Rich Inman, CAO

FROM: Cheryle Rutherford-Kelly

RE: Mental Health Lease of Equipment

Recommendation

It is respectfully requested that your Board: (1) approve a Behavioral Health lease for a computer server necessary to conduct business; (2) allow the buyout of two desk top computers; and (3) authorize your Chairman to sign the lease and Certificate of Incumbency and Authority.

Background/Current Situation

The transition of Mental Health services from Kings View to the County requires that the department of Human Services/Behavioral Health & Recovery Services obtain new leases for various types of equipment. The new lease with Dell is substantially similar to the lease currently in place through Kings View with the change of name to Mariposa County.

The lease with Dell includes a Certificate of Incumbency and Authority that will allow your Chairman, the Department Head, Behavioral Health Deputy Director and Fiscal Officer to have authority over the lease and execute lease end options.

It is recommended by our IT staff that the desktops be purchased at lease end and continue to lease the server as this will allow for upgrades in the future at a lower cost.

The lease approved by our Counsel, are summarized below:

<table>
<thead>
<tr>
<th>Agency/Entity</th>
<th>Purpose</th>
<th>Amount of Purchase/Lease</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dell Financial</td>
<td>Desk Top Computer</td>
<td>$ 448.95 Purchase</td>
</tr>
<tr>
<td>Services</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dell Financial</td>
<td>Desk Top Computer</td>
<td>$ 450.49 Purchase</td>
</tr>
<tr>
<td>Services</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dell Financial</td>
<td>Server</td>
<td>$ 473.34 Lease Per Month</td>
</tr>
<tr>
<td>Services</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Financial

These leases/buyouts will continue to be paid within the Mental Health budget unit 0402 and Alcohol & Drug unit 0403. There is no impact to general fund dollars.
MARIPOSA COUNTY  CLAIM FORM  Dept. Human Services/BHRS

DIRECTIONS: Claims must be properly itemized, giving name, date, particular services rendered, character of process served and upon whom, giving distances traveled, whereto and wherefrom, character of work done, number of days engaged, material furnished and quantity, and unit process paid therefore. Gov't. Code Section 29700. No claims can be audited or allowed unless or until these requirements have been complied with.

Demand of: Dell Financial Services  Vendor #
Address: 12234 N IH-35, Bldg. B
          Austin, TX 78753-1705

On the Treasurer of MARIPOSA COUNTY, State of Ca.

<table>
<thead>
<tr>
<th>DATE</th>
<th>ITEMS/DESCRIPTIONS OF SERVICES</th>
<th>AMOUNT</th>
</tr>
</thead>
<tbody>
<tr>
<td>10/7/2004</td>
<td>Lease assumption fee</td>
<td>254.00</td>
</tr>
<tr>
<td></td>
<td>Lease # 001-4189352-018 : 001-4189352-021 : 001-4189352-032</td>
<td></td>
</tr>
</tbody>
</table>

Caution: Read before signing: You are signing under penalty of perjury.

STATE OF CALIFORNIA

ss.

COUNTY OF MARIPOSA

I certify (or declare) under penalty of perjury that the foregoing claim and items as therein set out are true and correct: that no part thereof has been heretofore paid and that the amount as justly due; and that same is presented within one year after the last item has accrued.

Date: 10/7/2004

Expenditures Authorized & Approved by: [Signature]

<table>
<thead>
<tr>
<th>Department:</th>
<th>Human Services/BHRS</th>
<th>Project (if applicable)</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Account No.</td>
<td>001-0402-622.0430</td>
<td>MH120</td>
<td>127.00</td>
</tr>
<tr>
<td>Account No.</td>
<td>001-0403-623.0430</td>
<td>AD103</td>
<td>127.00</td>
</tr>
</tbody>
</table>