MARIPOSA COUNTY BOARD OF SUPERVISORS | **AGENDA ACTION FORM** | **DATE**: June 24, 2003 AGENDA ITEM NO. CA-16

DEPARTMENT: Child Support Services

BY: Debra Walton
PHONE: 966-3400

RECOMMENDED ACTION AND JUSTIFICATION:

Approve budget action transferring funds within the Child Support Services budget unit from Training & Seminars to Office Expense ($1,500). Child Support Services is completely funded by Federal and State dollars on a reimbursable basis, so that no matter what was budgeted, if the funds are not spent then the department cannot claim reimbursement of those funds. Training & Seminars expenditures have been less that anticipated and with next year's budget appropriations being reduced, the department wishes to transfer funds in order to purchase postage. While the postage is purchased this fiscal year it may be used in the next fiscal year.

BACKGROUND AND HISTORY OF BOARD ACTIONS:

The Board is required to approve budget actions than exceed $1,000 in any one line item.

ALTERNATIVES AND CONSEQUENCES OF NEGATIVE ACTION:

Do not approve the budget action. The department will not be able claim reimbursement for the requested $1,500 in postage and will need to use next fiscal year's appropriations.

Financial Impact? (X) Yes ( ) No Current FY Cost: $1,500 Annual Recurring Cost: $
Budgeted In Current FY? ( ) Yes (X) No ( ) Partially Funded

Amount in Budget:	$42,127	List Attachments, number pages consecutively
Additional Funding Needed:	$1,500	Budget Action
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.: 03-232 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: MWH

Revised Dec. 2002

BUDGET ACTION FORM

FUND	DEPT/DIV	ACCOUNT	DESCRIPTION	PROJECT	INCREASE	DECREASE
001	0207	515-0490	Travel-Training			1,500
001	0207	515-0417	Office Expenses		1,500	
0001	0104	414-1090	GENERAL CONTINGENCY			
TRANSFER BETWEEN FUNDS						
			TOTALS		1,500	1,500

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: Transfer unused monies in fund#0490 to Office Expenses #0417 to purchase postage.

DEPT. HEAD SIGNATURE [signature] **DATE** 6-17-03

APPROVED BY RES. NO. 03-232 **CLERK** [signature] **DATE** 6-24-03

AUDITOR'S USE ONLY
BA #