

DEPARTMENT: Community Services

BY: Mary Williams/966-5315

RECOMMENDED ACTION AND JUSTIFICATION: (Policy Item: Yes  No )

Authorize the Chairman to Sign Amended Agreement with Area 12 Agency on Aging and approve the budget action request for revenue and expenditures on the Congregate/Home Delivered Meal Program and the Northside Transportation Service to the Adult Day Care. Area 12 have requested changes due to either a decrease or increase in the number of seniors using the meal programs. The Adult Day Care started later than the projected date and are only open 3 days a week at the present time.

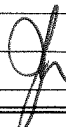
BACKGROUND AND HISTORY OF BOARD ACTIONS:

Board has authorized the Chairman to sign agreements with Area 12 Agency on Aging in the past.

LIST ALTERNATIVES AND CONSEQUENCES OF NEGATIVE ACTION:

- 1. Make any changes to the recommendation and give direction to staff.

<b>COSTS:</b> (x) Not Applicable A. Budgeted current FY \$ _____ B. Total anticipated costs \$ _____ C. Required additional funding \$ _____ D. Internal transfers \$ _____  <b>SOURCE:</b> ( ) 4/5ths Vote Required A. Unanticipated revenues \$ _____ B. Reserve for contingencies \$ _____ C. Source description: _____ Balance in Reserve for Contingencies, if approved: \$ _____	<b>SPECIAL INSTRUCTIONS:</b> List the attachments and number the pages consecutively: _____ _____ _____ _____
--	--

<b>CLERK'S USE ONLY:</b> Res. No.: 00-117, 00-118, 00-119 Vote - Ayes: 5 Absent: _____ Approved ( ) Denied Minute Order Attached ( ) No Action Necessary  Ord. No. _____ Noes: _____ Abstained: _____  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	<b>ADMINISTRATIVE OFFICER'S RECOMMENDATION:</b> This item on agenda as: _____ Recommended _____ Not Recommended _____ For Policy Determination _____ Submitted with Comment _____ Returned for Further Action  Comment: _____ _____ A.O. Initials: 
--	---



# COUNTY of MARIPOSA

P.O. Box 784, Mariposa, CA 95338 (209) 966-3222

GARRY R. PARKER, CHAIRMAN  
DOUG BALMAIN, VICE-CHAIRMAN  
PATTI A. REILLY  
ROBERT C. STEWART  
BOB PICKARD

DISTRICT IV  
DISTRICT II  
DISTRICT I  
DISTRICT III  
DISTRICT V



## MARIPOSA COUNTY BOARD OF SUPERVISORS

### MINUTE ORDER

---

TO: MARY WILLIAMS, Community Services Director  
FROM: MARGIE WILLIAMS, Clerk of the Board *MW*  
SUBJECT: Amended Agreements with Area 12 and Budget Actions for Various Senior Services;  
Res. 00-117, 00-118, 00-119

---

THE BOARD OF SUPERVISORS OF MARIPOSA COUNTY, CALIFORNIA,

ADOPTED THIS Order on April 4, 2000

#### ACTION AND VOTE:

Mary Williams, Community Services Director;

Authorize Chairman to Sign Amended Agreements with Area 12 and Approve Budget Actions for the Following Various Senior Services:

- A) C-1 Congregate Meal Services in the Amount of \$2,302 (4/5ths Vote Required);
- B) C-2 Home Delivered Meal Services in the Amount of \$1,486 (4/5ths Vote Required); and
- C) Northside Transportation Services in the Amount of \$4,322 (4/5ths Vote Required)

**BOARD ACTION:** Following discussion, (M)Balmain, (S)Pickard, amended agreements were approved – Congregate Meal Services/Res. 00-117; Home Delivered Meal Services/Res. 00-118; and Northside Transportation Services/Res. 00-119/Ayes: Unanimous.

cc: Ken Hawkins, Auditor  
File

BUDGET ACTION FORM

C-1 CONGREGATE MEALS

FUND	DEPT/DIV	ACCOUNT	DESCRIPTION	PROJECT	INCREASE	DECREASE
342	0517	305.74-06	AREA 12 GRANT			[2,483]
342	0517	306.72-37	USDA REIMBURSEMENT			[ 609]
342	0517	308.25-03	SEN NUTR DONATIONS			[ 269]
342	0517	305.74-13	AREA 12 OTO FUNDS		[1,059]	
342	0517	309.16-00	TRANSFER IN		[2,302]	
			SUB TOTAL		[3,361]	[3,361]
001	0161	427.07-57	INTERFUND		2,302	
0001	0104	414-1090	GENERAL CONTINGENCY			2,302
TRANSFER BETWEEN FUNDS					DEBIT	CREDIT
342	0517	309.16-00	TRANSFER IN		2,302	
342	0161	427.07-57	INTERFUND			2,302
<b>TOTALS</b>					\$0	\$0

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;
- 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 AREA 12 REDUCED THE # OF CONGREGATE MEALS THUS FUNDING WAS REDUCED. NO EXCESS  
IN LINE ITEM JUSTIFICATED INCREASE IN REVENUE SO REQUESTING FUNDING FROM CONTINGENCY FUND.

DEPT HEAD SIGNATURE Mary E. Williams Jr DATE 3-25-00  
 APPROVED BY RES NO. 00-117 CLERK [Signature] DATE 4-4-00

SENIOR NUTRITION  
 INTERFUND TRANSFERS  
 G.P. CONTINGENCY

AUDITOR'S USE ONLY BA #
----------------------------

BUDGET ACTION FORM

FUND	DEPT/DIV	ACCOUNT	DESCRIPTION	PROJECT	INCREASE	DECREASE	
342	0518	305.62-40	AREA 12 GRANT		[614]		
342	0518	306.72-07	USDA REIMBURSEMENT		[108]		
342	0518	308.25-02	SEN NUTR DONATIONS		[764]		
342	0518	715.04-33	RAW FOOD		441		
342	0518	715.04-34	CATERED FOOD		197		
342	0518	715.04-35	FOOD SERVICE SUPPIES		348		
342	0518	715.04-50	COUNTY VEHICLE EXPENSE		500		
0001	0104	414-1090	GENERAL CONTINGENCY				
<b>TRANSFER BETWEEN FUNDS</b>					<b>DEBIT</b>	<b>CREDIT</b>	
<b>TOTALS</b>					-0-	\$0	\$0

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;
- 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 DUE TO INCREASE IN HOME DELIVERED MEALS AREA 12 HAVE REQUESTED WE INCREASE THE NUMBER OF MEALS ORIGINAL PROJECTED BY 279 MEALS. INCREASE IN BOTH REVENUE AND LINE ITEMS.

DEPT HEAD SIGNATURE Mary E Williams DATE 3-25-00  
 APPROVED BY RES NO. 00-118 CLERK [Signature] DATE 4-4-00

SENIOR NUTRITION

AUDITOR'S USE ONLY BA #
----------------------------

**BUDGET ACTION FORM**

FUND	DEPT/DIV	ACCOUNT	DESCRIPTION	PROJECT	INCREASE	DECREASE
341	0519	305.74-14	AREA 12 ADULT DAY CARE	SP 7		[4,322]
341	0519	716.07-87	N/S TRANS ADULT DAY CARE	SP 7		4,322
606	0306	309.16-00	TRANSFER IN			[4,322]
606	0306	601.02-01	EXTRA HELP			116
606	0306	601.02-05	OUTREACH SPECIALIST			4,206
0001	0104	414-1090	GENERAL CONTINGENCY			
<b>TRANSFER BETWEEN FUNDS</b>					<b>DEBIT</b>	<b>CREDIT</b>
<b>TOTALS</b>					\$0	-0- \$0

- 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;
  - ( ) 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** AREA 12 AMMENDED THE N/S ADULT DAY CARE FUNDING FROM \$9,322 TO \$5,000 DUE TO LATER PROJECTED START DATE. TRANSFER IN ON TRANSIT BUDGET ADJUSTED BY EXTRA HELP HOURS AND OUTREACH SPECIALIST POSITION THAT WAS ELIMATED IN 99-2000 BUDGET.

DEPT HEAD SIGNATURE Mary E. Williams DATE 3-23-00  
 APPROVED BY RES NO. 00-119 CLERK mwl DATE 4-4-00

*SENIOR SERVICES  
TRANSIT*

AUDITOR'S USE ONLY BA #
----------------------------