DEPARTMENT: PROBATION
BY: GAIL A. NEAL
PHONE: (209) 966-3612

RECOMMENDED ACTION AND JUSTIFICATION: (Policy Item: Yes____ No ___X___)

Approve transfer of funds from Probation, Deputy Probation Officer Salaries (001-0224-533.01-60) to Probation Overtime (001-0224-533.02-30) in the amount of $1,000. Due to currently vacant Probation Officer positions, the remaining officers must assume additional on-call duties resulting in additional earned overtime. Because of less than a full staff, taking time off as comp creates a hardship on the department.

BACKGROUND AND HISTORY OF BOARD ACTIONS:

The Board approved a $500 overtime budget in the Probation Departments 1999/2000 budget.

LIST ALTERNATIVES AND CONSEQUENCES OF NEGATIVE ACTION:

Do not approve transfer, which would require officers to use required comp time within the 45-day time frame. This would cause officers to assume the tasks of other officers while off duty.
**BUDGET ACTION FORM**

<table>
<thead>
<tr>
<th>FUND</th>
<th>DEPT/DIV</th>
<th>ACCOUNT</th>
<th>DESCRIPTION</th>
<th>PROJECT</th>
<th>INCREASE</th>
<th>DECREASE</th>
</tr>
</thead>
<tbody>
<tr>
<td>001</td>
<td>0224</td>
<td>533.01-60</td>
<td>Salaries-Dep Probation Officer</td>
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<td></td>
<td>1,000</td>
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<tr>
<td>001</td>
<td>0224</td>
<td>533.02-30</td>
<td>Overtime</td>
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<td>1,000</td>
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**TRANSFER BETWEEN FUNDS**

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<tr>
<th>FUND</th>
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<th>DECREASE</th>
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<tbody>
<tr>
<td>001</td>
<td>0104</td>
<td>414-1090</td>
<td>GENERAL CONTINGENCY</td>
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</table>

**TOTALS** | 1,000 | 1,000 |

**ACTIONS 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 appropriating Reserve for 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**

To allow for overtime due to staff shortage.

**DEPT HEAD SIGNATURE**

**DATE**

**APPROVED BY RES NO.**

**CLERK**

**DATE**

**AUDITOR'S USE ONLY**

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Budget Revision Form Revised 11/95