

DEPARTMENT: D.A. Victim/Witness BY: William Flaherty PHONE: 742-7441

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

Resolution authorizing augmentation and extension through June 30, 1999 of the Office of Criminal Justice Planning Grant for the Mariposa County Victim/Witness Program.

BACKGROUND AND HISTORY OF BOARD ACTIONS:

The Board of Supervisors has approved Mariposa County Victim/Witness Program grant funding in past years. Victim/Witness Programs are being placed on a three year funding cycle instead of the previous one year reapplication process. The current grant for 1997-98 is being extended to June 30, 1999.

LIST ALTERNATIVES AND CONSEQUENCES OF NEGATIVE ACTION:

By not approving the Victim/Witness Augmentation and extension of the grant, services to the victims of crime within Mariposa County will be severely reduced.

COSTS: Not Applicable

A. Budgeted current FY _____ \$

B. Total anticipated costs _____ \$

C. Required additional funding _____ \$

D. Internal transfers _____ \$

SOURCE: 4/5ths Vote Required

A. Unanticipated revenues _____ \$

B. Reserve for contingencies _____ \$

C. Source description: _____

Balance in Reserve for Contingencies, if approved: \$ _____

SPECIAL INSTRUCTIONS:
List the attachments and number the pages consecutively:

CLERK'S USE ONLY:

Res. No.: 98-358 Ord. No. _____

Vote - Ayes: 5 Noes: _____

Approved: _____ Absent: _____

Minute Order Attached Denied 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

ADMINISTRATIVE OFFICER'S RECOMMENDATION:
This item on agenda as:

Recommended

Not Recommended

For Policy Determination

Submitted with Comment

Returned for Further Action

Comment: _____

A.O. Initials: *Jh*

RESOLUTION OF THE GOVERNING BOARD

WHEREAS the Mariposa County Board of Supervisors desires to undertake a certain project designated as the District Attorney Victim/Witness Program to be funded in part from funds made available through the Victim/Witness Assistance Program administered by the Office of Criminal Justice Planning (hereafter referred to as OCJP).

NOW, THEREFORE, BE IT RESOLVED that the District Attorney of the County of Mariposa is authorized, on its behalf to submit the attached proposal to OCJP and is authorized to sign and approve on behalf of the Mariposa County Board of Supervisors the attached Grant Award Agreement including any extensions or amendments thereof.

BE IT FURTHER RESOLVED that there is a no match funding requirement for this program.

IT IS AGREED that any liability arising out of the performance of this Grant Award Agreement, including civil court actions for damages, shall be the responsibility of the grant recipient and the authorizing agency. The State of California and OCJP disclaim responsibility for any such liability.

BE IT FURTHER RESOLVED that grant funds received hereunder shall not be used to supplant expenditures controlled by this body.

I hereby certify that the foregoing is a true copy of the resolution adopted by the Board of Supervisors, County of Mariposa, State of California in a meeting thereof held on September 22, 1998 by the following:

Vote:

Ayes: Reilly, Balmain, Stewart, Parker, Pickard

Noes: None

Absent: None

Signature: Patti Reilly Date: 9-22-98

Typed Name and Title: Patti Reilly, Chair of the Board of Supervisors

ATTEST: Signature: Margie Williams Date: 9-22-98

Typed Name and Title: Margie Williams, Clerk of the Board of Supervisors

THIS AGREEMENT, made and entered into this 25th day of June, 1998 in the State of California, by and between State of California, through its duly appointed or appointed, qualified and acting

TITLE OF OFFICER ACTING FOR STATE Executive Director	AGENCY Office of Criminal Justice Planning
CONTRACTOR'S NAME County of Mariposa	

, hereafter called the State, and
, hereafter called the Contractor.

WITNESSETH: That the Contractor for and in consideration of the covenants, conditions, agreements, and stipulations of the State hereinafter expressed, does hereby agree to furnish to the State services and materials as follows: (Set forth service to be rendered by Contractor, amount to be paid Contractor, time to performance or completion, and attach plans and specifications, if any.)

Grant Award Agreement No. VW97070220 between the parties hereto is hereby amended to increase the State amount by \$ 71,803 From \$ 56,803 to \$ 128,606 ; to increase the Total Project Cost by \$ 71,803 from \$ 56,803 to \$ 128,606 ; and to change the ending date from 6-30-98 to 6-30-99.

All other provisions under this agreement shall remain as previously agreed upon.

CONTINUED ON _____ SHEETS, EACH BEARING NAME OF CONTRACTOR AND CONTRACT NUMBER.

The provisions on the reverse side hereof constitute a part of this agreement.
 IN WITNESS WHEREOF, this agreement has been executed by the parties hereto, upon the date first above written.

STATE OF CALIFORNIA		CONTRACTOR			
AGENCY Office of Criminal Justice Planning		CONTRACTOR (If other than an individual, state whether a corporation, partnership, etc.) County of Mariposa			
BY (AUTHORIZED SIGNATURE) ▶		BY (AUTHORIZED SIGNATURE) 			
PRINTED NAME OF PERSON SIGNING		PRINTED NAME AND TITLE OF PERSON SIGNING Christine Johnson, District Attorney			
TITLE Executive Director		ADDRESS P.O. Box 748, Mariposa, CA 95338			
AMOUNT ENCUMBERED BY THIS DOCUMENT \$	PROGRAM CATEGORY (CODE AND TITLE)		FUND TITLE		Department of General Services Use Only
PRORATED AMOUNT ENCUMBERED FOR THIS CONTRACT \$	(OPTIONAL USE)				
TOTAL AMOUNT ENCUMBERED TO DATE \$	ITEM	CHAPTER	STATUTE	FISCAL YEAR	
OBJECT OF EXPENDITURE (CODE AND TITLE)					
I hereby certify upon my own personal knowledge that budgeted funds are available for the period and purpose of the expenditure stated above.		T.S.A. NO	B.R. NO		
SIGNATURE OF ACCOUNTING OFFICER ▶			DATE		

CONTRACTOR STATE AGENCY DEPT. OF GEN. SER. CONTROLLER