DEPARTMENT: District Attorney
BY: Christine Johnson
PHONE: 966-3626
Family Support

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

It is requested that a resolution approving and authorizing the Chairman to execute Personal Services Agreements with Debbie Walton and Rosalie Muller for their services to assist in auditing, extraction and input of designated case information into the Statewide Automated Child Support System.

It is requested that the funds for paying the costs associated with these Personal Service Agreements be transferred from Extra Help to Professional Services within the District Attorney/Family Support Division approved budget.

BACKGROUND AND HISTORY OF BOARD ACTIONS:
The Board of Supervisors approved the costs of extra help during the 1995/1996 budget process. The costs are to be offset by previously approved revenues anticipated from the Department of Social Services.

LIST ALTERNATIVES AND CONSEQUENCES OF NEGATIVE ACTION:
Negative action would result in the Family Support Division not being able to utilize the services of Debbie Walton and Rosalie Muller.

COSTS:
A. Budgeted current FY $ 
B. Total anticipated costs $ 
C. Required additional funding $14,902
D. Internal transfers $ 

SOURCE:
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:

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:

MARIPOSA COUNTY BOARD OF SUPERVISORS AGENDA ACTION FORM DATE: 2/6/96 AGENDA ITEM NO.: 4

Vote - Ayes: ___ Nays: ___
Abstained: ___ 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

Action Form Revised 5/92
COUNTY OF MARIPOSA

BUDGET ACTION FORM

DEPT/DIV: District Attorney/Family Support

CONTACT: Christine Johnson

DATE: 2/6/96

PHONE: 966-3626

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 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;

( ) Transfer by Administrator: Moving existing appropriations within a single budget category between line items (i.e. services and supplies, etc.)

( ) Transfer by Auditor: Moving salaries between line items to accommodate variances internal to salaries; OR transfers within the County budget under $50.00 to accommodate minor variations from the budget.

<table>
<thead>
<tr>
<th>FUND/DEPT/ACCT NO. From:</th>
<th>LINE ITEM DESCRIPTION</th>
<th>AMOUNT (FROM)/TO</th>
</tr>
</thead>
<tbody>
<tr>
<td>001-0207-515.02-01</td>
<td>Extra Help</td>
<td>( $14,902 )</td>
</tr>
<tr>
<td>To:</td>
<td>Professional Services</td>
<td>14,902</td>
</tr>
</tbody>
</table>

Justification: Transfer funds from extra help line item to Professional Services in order to pay invoices submitted by the contractors named in Personal Service Agreements.

Department Head Signature: ____________________________ Date: __________

Approved By: Res. No. 96-39 Clerk: ___________________ Date: 2-6-96

Auditor: ____________________________ Date: __________

AUDITOR'S USE ONLY:

Transfer No.: ____________________________ B.R. No.: __________

Budget Action Form Revised 5/92