

DEPARTMENT: Sheriff

BY: Brian Muller  
PHONE: 966-3615

**RECOMMENDED ACTION AND JUSTIFICATION:** The Mariposa County Sheriff's Office is seeking approval of a service contract with John C. Fremont Healthcare District to provide Dietary Services to the Mariposa County Adult Detention Facility.

The Mariposa County Sheriff's Office currently has a contract with John C. Fremont Healthcare District, to provide Dietary Services to inmates at the Mariposa County Adult Detention Facility. The current contract expires on June 30, 2005. The proposed contract will extend those services through June 30, 2006. The cost for services will total \$197,788 over the life of the contract, which is approx. a 4.7% increase over the existing contract.

**BACKGROUND AND HISTORY OF BOARD ACTIONS:** The Board of Supervisors approved the existing contract between John C. Fremont Healthcare District and the Mariposa County Adult Detention Facility

**ALTERNATIVES AND CONSEQUENCES OF NEGATIVE ACTION:** If the contract is not approved, the sheriff's office will have to seek a contract with an alternate service provider who may or may not be able to provide existing services at an equal or lower cost.

Financial Impact? ( ) Yes (X) No	Current FY Cost: \$ 0	Annual Recurring Cost: \$0
Budgeted In Current FY? ( ) Yes ( ) No (X) Partially Funded		
Amount in Budget: \$ _____		See attached service contract agreement
Additional Funding Needed: \$0 _____		_____
Source:		_____
Internal Transfer _____		_____
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.: 05-196 Ord. No. \_\_\_\_\_  
Vote - Ayes: 4 Noes: \_\_\_\_\_  
Absent: Fritz  
my Approved  
( ) Minute Order Attached ( ) No Action Necessary

**COUNTY ADMINISTRATIVE OFFICER:**

Requested Action Recommended  
 No Opinion  
Comments:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

CAO: [Signature]