

DEPARTMENT: Auditor

BY: Ken Hawkins

PHONE: 966-7606

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

This check was issued as a refund for overpayment of taxes. However, the recipient failed to cash the check in the prescribed 6 month period resulting in the check being voided and returned to the General Fund.

BACKGROUND AND HISTORY OF BOARD ACTIONS:

Per Government Code 29802, the Board of Supervisors has discretion as to whether they want to re-issue this stale-dated check.

LIST ALTERNATIVES AND CONSEQUENCES OF NEGATIVE ACTION:

To not reissue the check may cause a small claim action

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

Res. No.: 95-158 Ord. No. _____

Vote - Ayes: 5 Noes: _____

Absent: _____ Abstained: _____

Approved: _____ () Denied _____

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

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: [Signature]

MARIPOSA COUNTY BOARD OF SUPERVISORS

MINUTE ORDER

TO: KEN HAWKINS, Auditor
FROM: MARGIE WILLIAMS, Clerk of the Board *mw*
SUBJECT: Request to Reissue Stale-Dated Refund Check
(#511042) for an Overpayment of Taxes (\$624.21)
to Walter M. Fierson;
Resolution Number 95-158

THE BOARD OF SUPERVISORS OF MARIPOSA COUNTY, CALIFORNIA,
ADOPTED THIS Order on April 18, 1995

ACTION AND VOTE:

Ken Hawkins, Auditor;

B) Resolution Approving Request to Reissue Stale-Dated
Refund Check (#511042) for an Overpayment of Taxes (\$624.21)
to Mr. Walter M. Fierson (4/5ths Vote Required)

BOARD ACTION: Following discussion, (M)Taber, (S)Balmain,
Res. 95-158 adopted/Ayes: Unanimous. Direction was given
for the Auditor to bring back a policy for handling these
types of requests in the future.

cc: File

BUDGET ACTION FORM

DEPT/DIV: Auditor

CONTACT: Ken Hawkins

DATE: April 18, 1995

PHONE: 966-7606

ACTION REQUESTED: (Check All That Apply)

- (X) 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;
- () 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.

FUND/DEPT/ACCT NO.	LINE ITEM DESCRIPTION	AMOUNT
		(FROM)/TO
	<u>INCREASE EST REVENUE/APPROPRIATIONS</u>	
001-0000-308-0109	Cancelled Warrants	\$624.21
001-0107-421-0554	Auditor-Other Charges/Refunds	624.21

Justification: To reissue stale-dated check #511042 to Vendor # 17606 payable to Fierson, Walter M. for a refund of overpaid taxes on May 20, 1994. Reissuance of check is at discretion of the Board of Supervisors per G.C. 29802

Department Head Signature: _____ Date: _____

Approved By: Res. No. 95-158 Clerk: msj Date: 4-18-95
 Administrator: _____ Date: _____
 Auditor: _____ Date: _____

AUDITOR'S USE ONLY:

Description: _____ Transfer No.: _____
 _____ B.R. No.: _____