

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

RECOMMENDED ACTION AND JUSTIFICATION: (Policy Item: Yes\_\_\_ No\_\_\_)

Due to additional workspace needed to accomodate the Statewide Automated System equipment it is necessary to replace one desk in the Family Support Division. It is requested that the Board of Supervisors authorize the Auditor's Office to transfer funds available from the Excess Incentive Trust Account into the budget of the Family Support Division so that the desk may be purchased from fixed assets.

BACKGROUND AND HISTORY OF BOARD ACTIONS:

None

LIST ALTERNATIVES AND CONSEQUENCES OF NEGATIVE ACTION:

The desk needed would not be able to be purchased

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.: 95-483 Ord. No. \_\_\_\_\_

Vote - Ayes: 5 Nays: \_\_\_\_\_

Approved: \_\_\_\_\_ 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

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:

COUNTY OF  
MARIPOSA

BUDGET ACTION FORM

DEPT/DIV: District Attorney/Family Support

CONTACT: Christine Johnson/ Marita Green

DATE: 11/14/95

PHONE: 966-3626 or 966-3400

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;
- 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.

<u>FUND/DEPT/ACCT NO.</u>	<u>LINE ITEM DESCRIPTION</u>	<u>AMOUNT (FROM)/TO</u>
117-1100-880.0787	Incentive Trust	( \$688.08)
001-0207-309.1600		688.08
001-0207-309.1600	Transfer - In	688.08
001-0207-515.0678	Fixed Assets	688.08

Justification: Transfer funds from Incentive Trust into the  
the Family Support Division budget for purchase of desk

Department Head Signature: Christine D. Johnson Date: 11-3-95  
Approved By: Res. No. 95-483 Clerk: mmw Date: 11-14-95  
Administrator: \_\_\_\_\_ Date: \_\_\_\_\_  
Auditor: \_\_\_\_\_ Date: \_\_\_\_\_

AUDITOR'S USE ONLY:

Description: \_\_\_\_\_ Transfer No.: \_\_\_\_\_  
B.R. No.: \_\_\_\_\_