

DEPARTMENT: Public Works/Yosemite West

BY: Dana Hertfelder

PHONE: 966-5356

RECOMMENDED ACTION AND JUSTIFICATION:

Approve Budget Action for fiscal year 08-09 transferring(\$12,200) within the Yosemite West Maintenance District budget from Professional Services to Depreciation.

In the original budget for Yosemite West Maintenance District for fiscal year 08-09 we included appropriations in Depreciation for the wastewater division. Because expenses in the first half of the fiscal year were higher than anticipated, at mid-year we moved those appropriations to cover routine operating costs of the District. In the second half of the year expenses were less than anticipated, so we have adequate savings to fund depreciation.

The Yosemite West Advisory Committee has stated that their preference is to have money moved to the Utility Capital Fund at the end of each fiscal year if adequate funding is available. If this Budget Action is approved, Public Works will send a journal entry to the Auditors office to post the transfer from the Yosemite West Maintenance District budget to the Utility Capital fund.

BACKGROUND AND HISTORY OF BOARD ACTIONS:

None.

ALTERNATIVES AND CONSEQUENCES OF NEGATIVE ACTION:

Do not approve the requested action; we would be unable to transfer funds from the Yosemite West Maintenance District budget to the Yosemite West Utility Capital fund for future equipment replacement needs.

Financial Impact? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Current FY Cost: \$ 12,200	Annual Recurring Cost: \$
Budgeted In Current FY? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Partially Funded		
Amount in Budget: \$ 0		List Attachments, number pages consecutively
Additional Funding Needed: \$ 12,200		1. Budget Action Form
Source:		
Internal Transfer <u>X</u>		
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. 09 406 Ord. No. _____
Vote - Ayes: 5 Noes: _____
mw Absent: _____
mw Approved
() 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

COUNTY ADMINISTRATIVE OFFICER:

Requested Action Recommended
 No Opinion
Comments:

CAO: [Signature]

