

DEPARTMENT: Probation

BY: Gail Neal  
PHONE: 966-3612

**RECOMMENDED ACTION AND JUSTIFICATION:**

Approve budget action Transferring Funds from Senior Office Assistant to Probation Services / Training & Seminars (\$2,800.00).

The vacancy of Senior Office Assistant has resulted is a salary saving of \$2,800.00, therefore we are requesting these funds to be transferred to Probation Services / Training and Seminars. The Standards of Training for Correction (STC) monies were removed by the state causing a decrease in the training budget in the amount of \$5,500.00. Although the monies were removed, the annual 40 hours of training for each officer remains mandatory. The \$2,800.00 will help cover training until mid year. It is anticipated/hoped that additional probation monies will be discovered at the midyear.

**BACKGROUND AND HISTORY OF BOARD ACTIONS:**

The Board has previously approved similar transfers.

**ALTERNATIVES AND CONSEQUENCES OF NEGATIVE ACTION:**

Use general fund money to cover costs of training.

Financial Impact? ( X ) Yes ( ) No	Current FY Cost: \$2,800.00	Annual Recurring Cost: \$
Budgeted In Current FY? ( X ) Yes ( ) No ( ) Partially Funded		
Amount in Budget: \$		List Attachments, number pages consecutively
Additional Funding Needed: \$2,800.00		Budget Action
Source:		
Internal Transfer X		
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. 03-404 Ord. No. \_\_\_\_\_  
Vote - Ayes: 5 Noes: \_\_\_\_\_  
Absent: \_\_\_\_\_  
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]*

# BUDGET ACTION FORM

FUND	DEP/DIV	ACCOUNT	DESCRIPTION	PROJECT	INCREASE	DECREASE
001	0224	533-0196	Prob Salaries/S. Office Assist			2,800
001	0224	533-0490	Probation/Travel		2,800	
001	0104	414-1090	Contingencies			
<b>Totals</b>					<b>2,800</b>	<b>2,800</b>

TRANSFER BETWEEN FUNDS				DEBIT	CREDIT
<b>TOTALS</b>				<b>0</b>	<b>0</b>

**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 transferring appropriation from 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.

JUSTIFICATION: Transfer to Travel in order to cover for lost STC training funds cut by the State.

\_\_\_\_\_

\_\_\_\_\_

<b>DEPT HEAD SIGNATURE</b> <i>Gail P. Neal</i>	<b>DATE</b> <i>11/3/03</i>
<b>APPROVED BY RES NO.</b> <i>03 404</i> <b>CLERK</b> <i>mmw</i>	<b>DATE</b> <i>11-18-03</i>
<b>DEPARTMENT</b> <i>PROBATION</i>	<b>AUDITOR'S USE ONLY</b> BA #