

DEPARTMENT: ADMINISTRATIVE OFFICER BY: CMDR. SINCLAIR PHONE:

RECOMMENDED ACTION AND JUSTIFICATION:

APPOINT COMMANDER ROD SINCLAIR AS THE "APPLICANT'S AGENT" FOR THE REIMBURSEMENT PROCESS WITH THE STATE DES RELATIVE TO THE RECENT FIRES.

BACKGROUND AND HISTORY OF BOARD ACTIONS:

COMMANDER SINCLAIR WAS THE "COUNTY APPLICANT'S AGENT FOR THE LAST STATE REIMBURSEMENT PROCESS.

LIST ALTERNATIVES AND CONSEQUENCES OF NEGATIVE ACTION:

APPOINT ANOTHER PERSON TO ACT AS THE APPLICANTS AGENT

COSTS: (XXX) Not Applicable

- A. Budgeted current FY \$
- B. Total anticipated costs \$
- C. Requires add'l funding \$
- D. Source:

SPECIAL INSTRUCTIONS:

List the attachments and number the pages consecutively:
UTILIZE THE ATTACHED STATE FORM FOR THE RESOLUTION

SOURCE: () 4/5ths Vote Required

- A. Internal transfers \$
- B. Unanticipated revenues \$
- C. Reserve for Contingency \$
- D. Description:

Balance in Reserve for Contingency if approved: \$

CLERK'S USE ONLY:

Res. No.: 90-492
 Ord. No.:
 Vote: Ayes: 5 Noes:
 Absent: Abstained:
 Approved () Denied
 () Minute Order Attached

The foregoing instrument is a correct copy of the original on file in this office.

Date:

ATTEST: MARGIE WILLIAMS
 County of Mariposa, State of Ca.
 By: Deputy

ADMINISTRATIVE OFFICER'S

RECOMMENDATION:

This item on the agenda as:

- Recommended
- Not Recommended
- For Policy Determination
- Submitted with comment
- Returned for Further Action

Comment:

A. O. Initials:



DESIGNATION OF APPLICANT'S AGENT RESOLUTION

BE IT RESOLVED BY THE Board of Supervisors OF THE County of Mariposa

THAT Rod Sinclair, Sheriff's Commander,
(Name) (Title)

OR

Arthur Baggett, Chairman, Board of Supervisors,
(Name) (Title)

OR

_____, _____,
(Name) (Title)

is hereby authorized to execute for and in behalf of the County of Mariposa, a public entity established under the laws of the State of California, this application and to file it in the Office of Emergency Services for the purpose of obtaining certain federal financial assistance under P.L. 93-288 as amended by the Robert T. Stafford Disaster Relief and Emergency Assistance Act of 1988, or state financial assistance under the Natural Disaster Assistance Act.

THAT the County of Mariposa, a public entity established under the laws of the State of California, hereby authorizes its agent to provide to the State Office of Emergency Services for all matters pertaining to such state disaster assistance the assurances and agreements required.

Passed and approved this 23rd day of October, 1990

x [Signature] Chairman, Mariposa County
(Name and Title) Board of Supervisors

(Name and Title)

(Name and Title)

CERTIFICATION

I, Margie Williams, duly appointed and Clerk of the of
(Title)
the Board of Supervisors, do hereby certify that the above is a true and correct copy of a
resolution passed and approved by the Board of Supervisors of the County of Mariposa on the
23rd day of October, 1990.

Date: 10-30-90

Clerk of the Board
(Official Position)
[Signature]
(Signature)