

J.

22-1242:

Expansion of Jail Parking Lot Fence.

1. Consideration of approval of Receipt of Unanticipated Revenue No. 22-037 in the amount of \$36,300.00 derived from County Local Revenue Fund AB118- Booking Fees to Operating Transfer Out – General Fund for Fiscal Year 2022-2023. **4 Votes Required**

2. Consideration of approval of Receipt of Unanticipated Revenue No. 22-038 in the amount of \$36,300.00 derived from DOC Admin- Operating Transfer In to Equipment for Fiscal Year 2022-2023. **4 Votes Required**



BOARD OF SUPERVISORS COUNTY OF MADERA

MADERA COUNTY GOVERNMENT CENTER
200 WEST 4TH STREET / MADERA, CALIFORNIA 93637
(559) 675-7700 / FAX (559) 673-3302 / TDD (559) 675-8970
Agendas available: www.MaderaCounty.com

Members of the Board

Tom Wheeler
Brett Frazier
David Rogers
Robert L. Poythress
Leticia Gonzalez

The Board of Supervisors

January 3, 2023
Chairman Tom Wheeler

| | | |
|---|--|---|
| DEPARTMENT SHERIFF-CORONER'S OFFICE | DEPARTMENT CONTACT Whitney Cox | AGENDA ITEM J CONSENT CALENDAR |
| SUBJECT: Jail Fence Expansion RUR | REQUIRED VOTE: 4/5 Vote Required | DOC. ID NUMBER 22-1242 |
| STRATEGIC FOCUS AREA(S): Public Safety | | |
| CLERK NOTES: <div><div>For Clerk of the Board's Office Use Only</div><div><div><div><div>RESULT:</div><div>[TO]</div></div><div><div>MOVER:</div><div>{{motions.mover format="[[firstname]] [[lastname]], [[title]]"}}</div></div><div><div>SECONDER:</div><div>{{motions.seconder format="[[firstname]] [[lastname]], [[title]]"}}</div></div><div><div>AYES:</div><div>{{voting.for_names format="[[lastname]]"}}</div></div></div></div></div> | | |
| Is this item Budgeted? No Will this item require additional personnel? No Previous Relevant Board Actions: None PowerPoint Presentation? No Supporting Documents: Budget Adjustment | | DOCUMENT NO(S). |

RECOMMENDED ACTIONS:

Expansion of Jail Parking Lot Fence.

1. Consideration of approval of Receipt of Unanticipated Revenue No. 22-037 in the amount of \$36,300.00 derived from County Local Revenue Fund AB118-Booking Fees to Operating Transfer Out – General Fund for Fiscal Year 2022-2023. **4 Votes Required**

2. Consideration of approval of Receipt of Unanticipated Revenue No. 22-038 in the amount of \$36,300.00 derived from DOC Admin- Operating Transfer In to Equipment for Fiscal Year 2022-2023. **4 Votes Required**

DISCUSSION / FISCAL IMPACT / STRATEGIC FOCUS:

DISCUSSION:

The Sheriff's Office is in need of expanding the Jail Fencing to accommodate the facility staff. Per California Govt Code § 29551(a) The board of supervisors or city council of



BOARD OF SUPERVISORS COUNTY OF MADERA

MADERA COUNTY GOVERNMENT CENTER
200 WEST 4TH STREET / MADERA, CALIFORNIA 93637
(559) 675-7700 / FAX (559) 673-3302 / TDD (559) 675-8970
Agendas available: www.MaderaCounty.com

Members of the Board

Tom Wheeler
Brett Frazier
David Rogers
Robert L. Poythress
Leticia Gonzalez

any county, city and county, or city that opts to receive funds pursuant to Section 29552 shall establish a local detention facility revenue account, on behalf of the sheriff or the official responsible for local detention facilities in the county, city and county, or city, into which shall be deposited funds paid by the Controller, pursuant to Section 29552. The funds in the local detention facility revenue account shall be used exclusively for the purpose of operation, renovation, remodeling, or constructing local detention facilities and related equipment. The quote that the Sheriff's Office has received indicates that the cost should be \$36,300.

FISCAL IMPACT:

There is no fiscal impact on the general fund.

CONNECTION TO THE COUNTY OF MADERA STRATEGIC PLAN - MISSION 2023:

Strategic Focus Area 2: Employees. This purchase will allow the Sheriff's Office to expand the Jail Facility parking area.

ATTACHMENTS

1. RUR 22-038
2. RUR 22-037



Budget Adjustment Authorization

Submittal Date *

10/20/2022

For Fiscal Years *

2022-2023

Department *

Sheriff

Contact First Name *

Whitney

Contact Last Name *

Cox

Department/Org #

04000

Department Head Name *

Tyson Pogue

Will this Budget Adjustment be Board Approved? *

☒ Yes

☐ No

Draft Board Letter

If Board Approved, indicate the target Board date: *

11/8/2022

Please Select *

☐ Transfer of Appropriations ☒ Receipt of Unanticipated Revenue

Please select the document type(s) from the check boxes above. Your selection will remove unneeded fields from the form. Transfer of Appropriations Transfer From.

Receipt of Unanticipated Revenue

Fund Name *

General Fund

Fund # *

0100

Appropriations

Org # *

04610

Org Description *

DOC-Admin

Account # * Account Description *

740301

Equipment

Amount *

36,300

Total

\$ 36,300.00

Revenues

| Org #* | Org Description* | Account #* | Account Description* | Amount* |
|--------|------------------|------------|-----------------------|---------|
| 04610 | DOC-Admin | 680200 | Operating Transfer in | 36,300 |

Total

\$ 36,300.00

Totals in Appropriations and Revenues must match

Unanticipated Revenue is Derived from*

Expansion of Jail Fencing allowable expense per California Govt Code § 29551

(Describe the Revenue Source, Grant Name, Legislation, etc.)

Section

Name*

Whitney Cox

Title*

Fiscal Manager

Auditor to Complete

TO AUDITOR-CONTROLLER: This request is deemed necessary by this department. Please report as to the accounting and available balances and forward to the Administrative Officer for his recommendation or action.

Approved as to Availability of Funds:*

☒ Yes ☐ No

Auditor Controller's #*

22-038

Signature

Elizabeth Cruz

Auditor Name*

Elizabeth Cruz

Date*

10/21/2022

The County Auditor-Controller is authorized to make such budgetary adjustments as will carry out the intent and purpose of this budget adjustment.

Administrative Officer to Complete

Administrative Officer's Report*

County Administration has reviewed this request, and it is recommended for approval.

Please Select*

☒ Recommended ☐ Approve as Requested ☐ Approve as Revised

Signature*

Jessica Leon

Admin Officer Name*

Jessica Leon

Date*

10/21/2022

Attached for Board Approval

*

☒ Completed



Budget Adjustment Authorization

Submittal Date *

10/20/2022

For Fiscal Years *

2022-2023

Department *

Sheriff

Contact First Name *

Whitney

Contact Last Name *

Cox

Department/Org #

04000

Department Head Name *

Tyson Pogue

Will this Budget Adjustment be Board Approved? *

☒ Yes

☐ No

Draft Board Letter

If Board Approved, indicate the target Board date: *

11/8/2022

Please Select *

☐ Transfer of Appropriations ☒ Receipt of Unanticipated Revenue

Please select the document type(s) from the check boxes above. Your selection will remove unneeded fields from the form. Transfer of Appropriations Transfer From.

Receipt of Unanticipated Revenue

Fund Name *

County Local Rev Fund AbB118

Fund # *

6133

Appropriations

| Org # * | Org Description * | Account # * | Account Description * | Amount * |
|----------------|------------------------------------|--------------------|------------------------------|-----------------|
| 61338 | County Local Revenue Fund AB118 | 750100 | OP Trans Out - GEN FD | 36,300 |

Total

\$ 36,300.00

Revenues

| Org #* | Org Description* | Account #* | Account Description* | Amount* |
|--------|------------------------------------|------------|----------------------|---------|
| 61338 | County Local Revenue Fund AB118 | 661501 | Booking Fees | 36,300 |

Total

\$ 36,300.00

Totals in Appropriations and Revenues must match

Unanticipated Revenue is Derived from*

Expansion of Jail Fencing allowable expense per California Govt Code § 29551

(Describe the Revenue Source, Grant Name, Legislation, etc.)

Section

Name*

Whitney Cox

Title*

Fiscal Manager

Auditor to Complete

TO AUDITOR-CONTROLLER: This request is deemed necessary by this department. Please report as to the accounting and available balances and forward to the Administrative Officer for his recommendation or action.

Approved as to Availability of Funds:*

☒ Yes ☐ No

Auditor Controller's #*

22-037

Signature

Elizabeth Cruz

Auditor Name*

Elizabeth Cruz

Date*

10/21/2022

The County Auditor-Controller is authorized to make such budgetary adjustments as will carry out the intent and purpose of this budget adjustment.

Administrative Officer to Complete

Administrative Officer's Report *

County Administration has reviewed this request, and it is recommended for approval.

Please Select *

☒ Recommended ☐ Approve as Requested ☐ Approve as Revised

Signature *

Jessica Leon

Admin Officer Name *

Jessica Leon

Date *

10/21/2022

Attached for Board Approval

☒ Completed