***Submit completed worksheet to:***

*Siskiyou County Clerk, 510 N Main St, Yreka, CA 96097*

# **Agenda Worksheet**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Regular** | **[x]**  |  | **Time Requested:** | **5 Minutes** | **Meeting Date:** | **January 18, 2022** |
| ***OR*** |
| **Consent** | **[ ]**  |  |
| **Contact Person/Department:** | **Elizabeth Nielsen, County Administration** | **Phone:** | **842-8005** |
| **Address:** | **1312 Fairlane, Yreka** |
| **Person Appearing/Title:** | **Elizabeth Nielsen, County Administration** |
| **Subject/Summary of Issue:** |
| Discussion, direction and possible action regarding the first reading of an ordinance amending Section 2-2.201 of Chapter 2 of the Siskiyou County Code Relating to Hours of Work, and delegation by the Board to the County Administrator to order/amend County and departmental business hours as needed.  |
| **Financial Impact:** |
| **NO** | [x]  | *Describe why no financial impact:*       |
| **YES** | [ ]  | *Describe impact by indicating amount budgeted and funding source below* |
| Amount: |       |  |  |  |  |
| Fund:  |       |  | Description: |       | Org.: |       | Description: |       |
| Account: |       |  | Description: |       |  |
| Activity Code:  |       |  | Description: |       |  |
| Local Preference: YES [ ]  NO [ ]  |
| For Contracts – *Explain how vendor was selected:*       |
|       |
| Additional Information: |       |
|       |
| **Recommended Motion:** |
| If the Board so desires: 1. Introduce, waive, and approve the first reading of the ordinance to amend Section 2-2.201 of Chapter 2 of the Siskiyou County Code Relating to Hours of Work, 2. Direct the staff to bring back the ordinance for a second reading, and 3. Delegate authority to the County Administrator to order/amend County and departmental business hours as needed.  |
| **Reviewed as recommended by policy:** |  | ***Special Requests*:** |
| County Counsel |       |  |  |
|  |  |  | *Certified Minute Order(s)* |       | *Quantity:* |       |
| Auditor |       |  |  |  |  |  |
|  |  |  |  |  |  |
| Personnel |       |  | *Other:* |       |
| CAO |       |  |       |

***NOTE: For consideration for placement on the agenda, the original agenda worksheet and backup material must be submitted directly to the Board Clerk (after reviewing signatures have been obtained) by 12:00 p.m. on the Wednesday prior to the Board Meeting.*** Revised 8/26/19