***Submit completed worksheet to:***

*Siskiyou County Clerk, 311 Fourth St., Rm 201, Yreka, CA 96097*

# **Agenda Worksheet**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Regular** | **[ ]**  |  | **Time Requested:** | **5 mins** | **Meeting Date:** | **May 17, 2022** |
| ***OR*** |
| **Consent** | **[x]**  |  |
| **Contact Person/Department:** | **William Carroll, Deputy County Counse/Michael Perry Museum Director** | **Phone:** | **(530)842-8100** |
| **Address:** | **1312 Fairlane Road, Yreka, CA** |
| **Person Appearing/Title:** | **William Carroll, Deputy County Counsel** |
| **Subject/Summary of Issue:** |
| The Siskiyou County Historical Society has offered to the Museum various structures and items that comprise a substantial portion of the "Outdoor Museum" portion of the County Museum. The donations to the County would include the Spring School, the Blacksmith Shop, the Callahan Church, the Skid Shack, the Big Wheels Logging Arch, the Miner’s Cabin, the Davis Cabin, the Denny Bar Store replica and various pieces of farm equipment. Also, in regard to two pieces of personal property, a table saw and a child-size school desk, the SCHS would retain those items if and when discovered by the Museum, per a proposed letter agreement.  |
| **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: | l |  |
| Activity Code:  |       |  | Description: |       |  |
| Local Preference: YES [ ]  NO [ ]  |
| For Contracts – *Explain how vendor was selected:*       |
|       |
| Additional Information: |       |
|       |
| **Recommended Motion:** |
| Adopt resoution accepting various donations from the Siskiyou County Historical Society.  |
| **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 10:00 a.m. on the Monday the week prior to the Board Meeting.*** Revised 8/09/2021