***Submit completed worksheet to:***

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

# **Agenda Worksheet**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Regular** | **[ ]**  |  | **Time Requested:** |  | **Meeting Date:** | **12/12/23** |
| ***OR*** |
| **Consent** | **[x]**  |  |
| **Contact Person/Department:** | **Courtney Greenley / Sheriff** | **Phone:** | **530-842-8326** |
| **Address:** | **305 Butte St, Yreka CA 96097** |
| **Person Appearing/Title:** | **Jeremiah LaRue, Sheriff-Coroner** |
| **Subject/Summary of Issue:** |
| The California Department of Boating and Waterways provides financial aid to the Siskiyou County Sheriff’s Department for the purpose of performing Boating Safety and Enforcement activities on the County’s lakes and waterways. The grant reimburses costs associated to: wages, utilities, fuel, repairs, storage, equipment, vehicle mileage etc.The grant covers the period of July 1, 2024 through June 30, 2025. Historically, the State has provided the County with $71,489 to run our program, which we continue to anticipate, in addition to the boat tax revenue from the prior year, estimated by the Auditor-Controller in the amount of $31,540.29 |
| **Financial Impact:** |
| **NO** | [ ]  | *Describe why no financial impact:*       |
| **YES** | [x]  | *Describe impact by indicating amount budgeted and funding source below* |
| Amount: | TBD |  |  |  |  |
| Fund:  | 1002 |  | Description: | SHERIFF | Org.: | 202010 | Description: | SHERIFF |
| Account: | 540800 |  | Description: | STATE OTHER |  |
| Activity Code:  | 2025 |  | Description: | BOAT&SAFETY |  |
| Local Preference: YES [ ]  NO [ ]  |
| For Contracts – *Explain how vendor was selected:*       |
|       |
| Additional Information: |       |
|       |
| **Recommended Motion:** |
| Approve the Sheriff's Office's application for funding the 24/25 Boating Safety and Enforcement Financial Aid Program with the California Department of Boating and Waterways. Authorize the Sheriff to sign any documents required and operate the program per State guidelines and the Board to adopt the resolution.      |
| **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