



County of Santa Cruz

HUMAN RESOURCES AGENCY

1000 EMELINE ST., SANTA CRUZ, CA 95060
(831) 454-4130 OR 454-4045 FAX: (831) 454-4642
CECILIA ESPINOLA, ADMINISTRATOR

December 27, 2001

AGENDA: January 8, 2002

BOARD OF SUPERVISORS
County of Santa Cruz
701 Ocean Street
Santa Cruz, CA 95060

COMMUNITY PROGRAMS AMENDMENTS FOR ADDITIONAL 4% COLA

Dear Members of the Board:

As you will recall, during budget hearings your Board approved an additional 4% cost of living adjustment (COLA) in the amount of \$384,109 for Community Programs and other nonprofit agency contractors to increase the wages of the contractors' lowest paid workers. Your Board also directed staff to return with other proposed uses of the additional 4% COLA for further review and consideration. The purpose of this letter is to provide your Board with a report on implementation of the additional 4% COLA, and to request your Board's approval of those amendments requesting alternative uses of the additional 4% COLA by Community Programs and one Parks Department contractor.

On August 7, 2001 your Board adopted contract language for the amendment, and authorized the Human Resources Agency, the Health Services Agency, and County Parks to enter into amendments with contractors who fully utilized the additional 4% COLA by increasing wages up to a \$14.00 per hour cap. Pursuant to your Board's direction, staff distributed amendments to all sixty Community Programs contractors on September 14, 2001 and the majority were returned and processed administratively, since they utilized the additional 4% COLA solely to increase wages below the \$14.00 per hour cap. These amendments increased the wages of the lowest paid workers in Community Programs from a range of \$6.25 to \$13.00, to a range of \$6.75 to \$14.00.

0339

Amendments for Additional 4% COLA
 Agenda: January 8, 2002
 Page 2 of 3

Thirteen other amendments received from Community Programs propose to use the additional 4% COLA for slightly different purposes, and these are submitted to your Board for approval. Generally, these amendments fall into two major categories: 1) those that use the funds fully or partially for wage increases above the \$14.00 cap, and 2) those in which the agency is subject to a collective bargaining agreement, and the contractor is not at liberty to unilaterally increase the wages of the lowest paid workers. The amendment requests are listed by category in the chart below.

Funds used fully or partially for salaries above \$14.00 per hour, or for increased staff hours	Agency subject to a Collective Bargaining Agreement
Cabrillo College Stroke Center	California Rural Legal Assistance (Legal Aid)
Central Coast Center for Independent Living	Child Development Resource Center
Court Appointed Special Advocates	Defensa de Mujeres
Community Action Board	PVUSD/Healthy Start Program
Project Scout	Salud Para La Gente
Senior Citizens Legal Services	
Survivors Healing Center	
WomanCARE, Inc.	

In the first category, the additional 4% COLA would be used to raise salaries up to and above the \$14.00 level, in order to maintain the agency's overall salary structure. Also included in this category are those amendments using funds to augment staff hours. In the second case, contractors governed by a collective bargaining agreement have budgeted the additional 4% COLA to partially support the next scheduled step increase under the union agreement, or to increase position hours. It might be pointed out that in nearly all cases, all employees of the listed contractors are paid more than the \$11.00/\$12.00 living wage level established by your Board last November. The three agencies which have employees paid less than the living wage are subject to a union agreement, and it is anticipated that the wages will be raised above the \$11.00 level (with benefits) when the collective bargaining agreement is renegotiated.

Since the proposed use of the additional 4% COLA funds by these thirteen Community Programs is consistent with your Board's stated purpose to increase the wages of the contractors' lowest paid workers, your Board's approval of the amendments (on file with the Clerk of the Board) is recommended. Attachment A also contains information concerning the proposed amendment of the Cultural Council of Santa Cruz County, a contract administered by the County Parks

0349

Amendments for Additional **4%** COLA
Agenda: January 8, 2002
Page 3 of 3

Department. County Parks staff has reviewed the proposed Cultural Council amendment, and also recommends your Board's approval.

IT IS THEREFORE RECOMMENDED that your Board:

1. Accept and file this report on the implementation of the additional **4%** COLA for Community Programs approved by your Board in the budget hearings; and
2. Approve amendments to thirteen FY 01-02 Community Program contracts and to one Parks Department contract for utilization of the additional **4%** COLA as specified in Attachment A to this letter, and authorize the Human Resources Agency Administrator and County Parks Department Director to sign the amendments on behalf of the County.

Very truly yours,

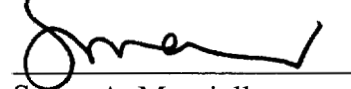


CECILIA ESPINOLA
Administrator

Attachment

CE/GM (n:\admin\boardltr\4%other.doc)

RECOMMENDED:



Susan A. Mauriello
County Administrative Officer

cc: Parks, Open Space, and Cultural Services Department
Living Wage Coalition
Human Care Alliance
Contractors

ATTACH A - COMMUNITY PROGRAMS ADDITIONAL COLA
 LESS THAN FOR WAGES LESS \$14.00

PROPOSED USE Page 1 of 2 ADDITIONAL INFORMATION

AGENCY	PROPOSED USE	ADDITIONAL INFORMATION
Cabrillo College Stroke Center	\$1758 / cost one instructional aide for functional aides two years a weeks at \$13.68 per hour. ge increase not entirely fur inds not raised hours must iced.	
California Rural Legal Assistance (Legal Aid)	\$2027 mount will be utilized for str uses and cost of living adjust ed under agency's collective ing agreement. ment. Lowest salary is \$ to raise wage of one position to \$14.00. Balance of \$59 salary increase plus payroll c salary increase partially support b mount to partially support th of one position, requiring y's collective bargaining ment.	agency had only one position than \$14.00 per hour. subject to County Off collective bargain Lowest paid work ment. Lowest living w 61 per hour. agency implemented living w than two years ago on its and all workers earn ative, and all workers with ben \$11.00 per hour with ben only one position than \$14.00 per hour.
Central Coast Center For Independent Living	\$1067.6 to fund regularly scheduled uses for 3 workers under \$14 6610 to fund step increases f ty-funded employees earning \$14.00.	agency had only one position than \$14.00 per hour.
Child Development Resource Center/COE	\$551.5 to raise wage of one posit to \$13.50 to \$14.00. Balance o rtial cost of increasing same on to \$14.50.	agency wage structure govern active bargaining agree rest paid worker earns \$10
Community Action Board	\$551.5 amount will be utilized for st ases and cost of living adjust ired under agency's collective aining agreement.	
Court Appointed Special Advocates		
Defensa de Mujeres		

037

0340

ATTACHMENT A - COMMUNITY PROGRAMS ADDITIONAL 4% COLA Exhibit A
PROPOSED USE OTHER THAN FOR WAGES LESS THAN \$14.00

Page 2 of 2

AGENCY	ADDITIONAL 4% AMOUNT	PROPOSED USE	ADDITIONAL INFORMATION
Project Scout	\$77	Full amount to increase Project Coordinator's hours one hour per quarter.	Agency has only one paid staff position, which is part time, and paid at a rate higher than \$14.00 per hour.
PVUSD/Healthy Start Program	\$1049	Full amount to cover salary of staff position not fully funded. Wage amount set by collective bargaining agreement.	Agency wage structure governed by PVUSD collective bargaining agreement.
Salud Para La Gente	\$8227	Full amount will be utilized for step increases and cost of living adjustments required under agency's collective bargaining agreement.	Agency wage structure governed by collective bargaining agreement. Lowest paid worker earns \$9.59 per hour.
Senior Citizens Legal Services	\$2519	\$1685 to raise salary of one position from \$13.00 to \$13.50, and another from \$13.60 to \$14.00. Balance of \$834 to increase salary of bilingual paralegal above \$14.00 level.	Agency utilizing funds for lowest paid workers.
Survivors Healing Center	\$208	Full amount to partially cover cost of wage increase of lowest paid position from \$10.00 to \$12.00 which took place last spring.	Prior wage increase not fully funded.
WomenCARE Inc.	\$400	Full amount to increase the hours of lowest paid worker by two hours a month.	Lowest paid worker is part time and earns \$15.00 per hour.
Cultural Council of Santa Cruz County (Parks Dept.)	\$6821	\$865 to increase salary of one position from \$13.00 to \$13.52. Balance of \$5952 to provide small increases to 7 positions paid more than \$14.00 /hr.	Agency recently restructured its salary scale and all positions paid more than \$13.00 per hour.

0341

037

COUNTY OF SANTA CRUZ
REQUEST FOR APPROVAL OF AGREEMENT

0343 0342

TO: Board of Supervisors
County Administrative Officer
County Counsel
Auditor-Controller

FROM: Human Resources Agency (Dept.)
Thomas Hinch (Signature) 9/25/01 (Date)

The Board of Supervisors is hereby requested to approve the attached agreement and authorize the execution of the same.

1. Said agreement is between the Human Resources Agency (Agency)
501 Upper Park Drive, Delaveaga Park
and, Cabrillo College Stroke Center, Santa Cruz, CA. 95065 (Name & Address)
2. The agreement will provide An amendment for special purpose budget augmentation to
existing contract.
3. The agreement is needed To implement Board of Supervisors' decision of August 7, 2001.
4. Period of the agreement is from July 1, 2001 to June 30, 2002
5. Anticipated cost is \$ 47,456.00 ~~Fixed amount Monthly~~ Not to exceed
6. Remarks: Prior encumbrance \$45,698.00
Staff: Teresita Hinojosa-Pereira, x4058
7. Appropriations are budgeted in 395200 (Index#) 5655 (Subobject)

NOTE: IF APPROPRIATIONS ARE INSUFFICIENT, ATTACH COMPLETED FORM AUD-74

Appropriations are available and have been encumbered. Contract No. 10418 Date _____
are not will be

GARY A. KNUTSON, Auditor - Controller

By G. Knutson Deputy.

Proposal reviewed and approved. It is recommended that the Board of Supervisors approve the agreement and authorize the
JIRA Administrator to execute the same on behalf of the County of Santa Cruz
Human Resources Agency (Agency).

Remarks: LG (Analyst) By Ch. Sch County Administrative Officer Date 10/15/01

Agreement approved as to form. Date _____

Distribution:
Bd. of Supv. - White
Auditor-Controller - Blue
County Counsel - Green *
Co. Admin. Officer - Conory
Auditor-Controller - Pink
Digitizing Dept. - Goldenrod
037
*To Crig. Dept. if rejected.

State of California)
County of Santa Cruz) ss
I _____ ex-officio Clerk of the Board of Supervisors of the County of Santa Cruz,
State of California, do hereby certify that the foregoing request for approval of agreement was approved by
said Board of Supervisors as recommended by the County Administrative Officer by an order duly entered
in the minutes of said Board on _____ County Administrative Officer
_____ 19 _____ By _____ Deputy Clerk

COUNTY OF SANTA CRUZ
REQUEST FOR APPROVAL OF AGREEMENT

0343

TO: Board of Supervisors
County Administrative Officer
County Counsel
Auditor-Controller

FROM:

Human Resources Agency (Dept.)

Theresa Hinojosa (Signature) 9/5/01 (Date)

The Board of Supervisors is hereby requested to approve the attached agreement and authorize the execution of the same.

1. Said agreement is between the Human Resources Agency (Agency)
and, California Rural Legal Assistance, 21 Carr Street, Watsonville, CA. 95076 (Name & Address)
2. The agreement will provide An amendment for special purpose budget augmentation to
existing contract.
3. The agreement is needed To implement Board of Supervisors' decision of August 7, 2001.
4. Period of the agreement is from July 1, 2001 to June 30, 2002
5. Anticipated cost is \$ 54,724.00 ~~(Fixed amount)~~ ~~(Monthly)~~ ~~(XXX)~~ Not to exceed)
6. Remarks: Prior encumbrance \$52,697.00
Staff: Teresita Hinojosa-Pereira, x4058
7. Appropriations are budgeted in 395200 (Index#)- 5465 (Subobject)

NOTE: IF APPROPRIATIONS ARE INSUFFICIENT, ATTACH COMPLETED FORM AUD-74

Appropriations are available and have been encumbered. Contract No. TBD Date _____
are not will be

GARY A. KNUTSON, Auditor - Controller

By [Signature] Deputy.

Proposal reviewed and approved. It is recommended that the Board of Supervisors approve the agreement and authorize the
HRA Administrator to execute the same on behalf of the County of Santa Cruz

Human Resources Agency (Agency).

Remarks: [Signature] (Analyst)

County Administrative Officer
By [Signature] Date 9/5/01

Agreement approved as to form. Date _____

Distribution:

Bd. of Supv. - White
Auditor-Controller - Blue
County Counsel - Green
Co. Admn. Officer - Canary
Auditor-Controller - Pink
Originating Dept. - Goldenrod

'To Orig. Dept. if rejected.

ADM - 29 (6/95)

State of California)
County of Santa Cruz) ss

I _____ ex-officio Clerk of the Board of Supervisors of the County of Santa Cruz,
State of California, do hereby certify that the foregoing request for approval of agreement was approved by
said Board of Supervisors as recommended by the County Administrative Officer by an order duly entered
in the minutes of said Board on _____

_____ 19 _____ By _____ Deputy Clerk

037

COUNTY OF SANTA CRUZ
REQUEST FOR APPROVAL OF AGREEMENT

0343 0344

TO: Board of Supervisors
County Administrative Officer
County Counsel
Auditor-Controller

FROM: Human Resources Agency (Dept.)
Theresa G. Lee (Signature) 7/25/01 (Date)

The Board of Supervisors is hereby requested to approve the attached agreement and authorize the execution of the same.

- Said agreement is between the Human Resources Agency (Agency)
234 Capitol Street, Suite A
and Central Coast Center for Independent Living, Salinas, CA. 93901-2600 (Name & Address)
- The agreement will provide An amendment for special purpose budget augmentation to
existing contract.
- The agreement is needed To implement Board of Supervisors' decision of August 7, 2001.
- Period of the agreement is from July 1, 2001 to June 30, 2002
- Anticipated cost is \$ 28,813.00 ~~XXXXXXXXXXXXXXXXXXXX~~ (Fixed amount, Monthly rate, Not to exceed)
- Remarks: Prior encumbrance \$27,746.00
Staff: Teresita Hinojosa-Pereira, x4058
- Appropriations are budgeted in 395200 (Index#) 5245 (Subobject)

NOTE: IF APPROPRIATIONS ARE INSUFFICIENT, ATTACH COMPLETED FORM AUD-74

Appropriations are available and have been encumbered. Contract No. 10284 Date _____
are not will be

GARY A. KNUTSON, Auditor - Controller

By *[Signature]* Deputy.

Proposal reviewed and approved. It is recommended that the Board of Supervisors approve the agreement and authorize the
HRA Administrator to execute the same on behalf of the County of Santa Cruz
Human Resources Agency (Agency). County Administrative Officer

Remarks: gg (Analyst)

By *[Signature]* Date 7/15/01

Agreement approved as to form. Date _____

Distribution:
Bd. of Supv. - White
Auditor-Controller - Blue
County Counsel - Green
Co. Admin. Officer - Conary
Auditor-Controller - Pink
Crim. Inv. Dept. - Goldenrod
037
* To Crig. Dept. if rejected.

State of California)
County of Santa Cruz) ss
I _____ ex-officio Clerk of the Board of Supervisors of the County of Santa Cruz.
State of California, do hereby certify that the foregoing request for approval of agreement was approved by
said Board of Supervisors as recommended by the County Administrative Officer by an order duly entered
in the minutes of said Board on _____ County Administrative Officer
_____ 19 _____ By _____ Deputy Clerk

0348 0345

COUNTY OF SANTA CRUZ
REQUEST FOR APPROVAL OF AGREEMENT

TO: Board of Supervisors
County Administrative Officer
County Counsel
Auditor-Controller

FROM: Human Resources Agency (Dept.)
[Signature] (Signature) 9/15/01 (Date)

The Board of Supervisors is hereby requested to approve the attached agreement and authorize the execution of the same.

1. Said agreement is between the Human Resources Agency (Agency)
and, Child Development Resource Center/County Office of Education, 809-H Bay Avenue, Capitola, CA. 95010 (Name & Address)
2. The agreement will provide An amendment for special purpose budget augmentation to
existing contract.
3. The agreement is needed To implement Board of Supervisors' decision of August 7, 2001.
4. Period of the agreement is from July 1, 2001 to June 30, 2002
5. Anticipated cost is \$ 7,230.00 ~~Fixed amount~~ ~~Monthly rate~~ ~~Not to exceed~~
6. Remarks: Prior encumbrance \$6,962.00
Staff: Teresita Hinojosa-Pereira, x4058
7. Appropriations are budgeted in 395200 (Index#) 5300 (Subobject)

NOTE: IF APPROPRIATIONS ARE INSUFFICIENT, ATTACH COMPLETED FORM AUD-74

Appropriations are available and have been encumbered. Contract No. 10112 Date _____
are not will be

GARY A. KNUTSON, - Controller
By [Signature] Deputy.

Proposal reviewed and approved. It is recommended that the Board of Supervisors approve the agreement and authorize the
HRA Administrator to execute the same on behalf of the County of Santa Cruz

Human Resources Agency (Agency).

Remarks: [Signature] (Analyst)

County Administrative Officer
By [Signature] Date 10/15/01

Agreement approved as to form. Date _____

Distribution:

Bd. of Supv. - White
Auditor-Controller - Blue
County Counsel - Green
Co. Adm. Officer - Canary
Auditor-Controller - Pink
Originating Dept. - Goldenrod

'To Or g. Dept. if rejected.

ALM - 29 (6/95)

State of California)
County of Santa Cruz) ss

I _____ ex-officio Clerk of the Board of Supervisors of the County of Santa Cruz,
State of California, do hereby certify that the foregoing request for approval of agreement was approved by
said Board of Supervisors as recommended by the County Administrative Officer by an order duly entered
in the minutes of said Board on _____

By _____ County Administrative Officer
Deputy Clerk

0337

COUNTY OF SANTA CRUZ
REQUEST FOR APPROVAL OF AGREEMENT

0344 0346

TO: Board of Supervisors
County Administrative Officer
County Counsel
Auditor-Controller

FROM: Human Resources Agency (Dept.)
Francesca (Signature) 9/25/01 (Date)

The Board of Supervisors is hereby requested to approve the attached agreement and authorize the execution of the same.

1. Said agreement is between the Human Resources Agency (Agency)
501 Soquel Avenue, Suite E
and Community Action Board of Santa Cruz County, Inc., Santa Cruz, CA. 95062 (Name & Address)
2. The agreement will provide An amendment for special purpose budget augmentation to
existing contract.
3. The agreement is needed To implement Board of Supervisors' decision of August 7, 2001.
4. Period of the agreement is from July 1, 2001 to June 30, 2002
5. Anticipated cost is \$ 213,459.00 ~~Fixed Annual, Monthly, or~~ Not to exceed
6. Remarks: Prior encumbrance \$205,590.00
Staff: Teresita Hinojosa-Pereira, x4058
7. Appropriations are budgeted in 395200 (Index#) 5250 (Subobject)

NOTE: IF APPROPRIATIONS ARE INSUFFICIENT, ATTACH COMPLETED FORM AUD-74

Appropriations are available and have been encumbered. Contract No. _____ Date _____
are not will be

GARY A. KNUTSON, Auditor - Controller
By Knutson Deputy.

Proposals reviewed and approved. It is recommended that the Board of Supervisors approve the agreement and authorize the
HRA Administrator to execute the same on behalf of the County of Santa Cruz
Human Resources Agency (Agency).

Remarks: GH (Analyst) By GH County Administrative Officer Date 10/15/01

Agreement approved as to form. Date _____

Distribution:
Bd. of Supv. - White
Auditor-Controller - Blue
County Counsel - Green *
Co. Admin. Officer - Canary
Auditor-Controller - Pink
Orig. in Dept. - Goldenrod
To Hrg. Dept. if rejected.

State of California)
County of Santa Cruz) ss
I _____ ex-officio Clerk of the Board of Supervisors of the County of Santa Cruz.
State of California, do hereby certify that the foregoing request for approval of agreement was approved by
said Board of Supervisors as recommended by the County Administrative Officer by an order duly entered
in the minutes of said Board on _____ County Administrative Officer
_____ 19 _____ BY _____ Deputy Clerk

COUNTY OF SANTA CRUZ
REQUEST FOR APPROVAL OF AGREEMENT

0348 0347

TO: Board of Supervisors
County Administrative Officer
County Counsel
Auditor-Controller

FROM: Human Resources Agency (Dept.)
Francis Hies (Signature) 9/25/01 (Date)

The Board of Supervisors is hereby requested to approve the attached agreement and authorize the execution of the same.

- Said agreement is between the Human Resources Agency (Agency)
726 Water Street
and, Court Appointed Special Advocates of Santa Cruz County, Santa Cruz, CA. 95060 (Name & Address)
- The agreement will provide An amendment for special purpose budget augmentation to
existing contract.
- The agreement is needed To implement Board of Supervisors' decision of August 7, 2001.
- Period of the agreement is from July 1, 2001 to June 30, 2002
- Anticipated cost is \$ 43,678.00 (Fixed amount Monthly rate Not to exceed)
- Remarks: Prior encumbrance \$42,060.00
Staff: Teresita Hinojosa-Pereira. x4058
- Appropriations are budgeted in 395200 (Index#) 4462 (Subobject)

NOTE: IF APPROPRIATIONS ARE INSUFFICIENT, ATTACH COMPLETED FORM AUD-74

Appropriations are available and have been encumbered. Contract No. 10929 Date

GARY A. KNUTSON, Auditor-Controller
By *Raffa* Deputy.

Proposal reviewed and approved. It is recommended that the Board of Supervisors approve the agreement and authorize the
HRA Administrator to execute the same on behalf of the County of Santa Cruz
Human Resources Agency (Agency).

Remarks 49 (Analyst) By *Ed Schuy* Date 10/15/01
County Administrative Officer
Agreement approved as to form. Date

Distribution:
Bd. of Supv. - White
Auditor-Controller - Blue
County Counsel - Green
Co. Admin. Officer - Canary
Auditor-Controller - Pink
Originating Dept. - Goldenrod
To Crig. Dept. if rejected.

State of California)
County of Santa Cruz) ss
I ex-officio Clerk of the Board of Supervisors of the County of Santa Cruz.
State of California, do hereby certify that the foregoing request for approval of agreement was approved by
said Board of Supervisors as recommended by the County Administrative Officer by an order duly entered
in the minutes of said Board on County Administrative Officer
19 By Deputy Clerk

COUNTY OF SANTA CRUZ
REQUEST FOR APPROVAL OF AGREEMENT

0348

TO: Board of Supervisors
 County Administrative Officer
 County Counsel
 Auditor-Controller

FROM:

Human Resources Agency

(Dept.)

Francisco Hinojosa (Signature) 9/25/01 (Date)

The Board of Supervisors is hereby requested to approve the attached agreement and authorize the execution of the same.

- Said agreement is between the Human Resources Agency (Agency)
 and, Defensa de Mujeres, 406 Main Street, Room 326, Watsonville, CA. 95076 (Name & Address)
- The agreement will provide An amendment for special purpose budget augmentation to
existing contract.
- The agreement is needed To implement Board of Supervisors' decision of August 7, 2001.
- Period of the agreement is from July 1, 2001 to June 30, 2002
- Anticipated cost is \$ 174,415.00 ~~(Fixed annual Monthly rate)~~ Not to exceed
- Remarks: Prior encumbrance \$168,474.00
Staff: Teresita Hinojosa-Pereira, x4058
- Appropriations are budgeted in 395200 (Index#) 4470 (Subobject)

NOTE: IF APPROPRIATIONS ARE INSUFFICIENT, ATTACH COMPLETED FORM AUD-74.

Appropriations are available and have been encumbered. Contract No. 10631 Date _____
 are not available and will be encumbered.

GARY A. KNUTSON, Auditor - Controller

By *G. A. Knutson* Deputy.

Proposal reviewed and approved. It is recommended that the Board of Supervisors approve the agreement and authorize the
HRA Administrator to execute the same on behalf of the County of Santa Cruz
Human Resources Agency (Agency).

Remarks: *GH* (Analyst)

County Administrative Officer
 By *G. H. Hinojosa* Date 9/15/01

Agreement approved as to form. Date _____

Distribution:

Bd. of Supv. • White
 Auditor-Controller • Blue
 County Counsel • Green *
 Co. Admin. Officer • Canary
 Auditor-Controller • Pink
 Originating Dept. • Goldenrod
 * To Orig. Dept. if rejected.

State of California)
 County of Santa Cruz) ss

I _____ ex-officio Clerk of the Board of Supervisors of the County of Santa Cruz,
 State of California, do hereby certify that the foregoing request for approval of agreement was approved by
 said Board of Supervisors as recommended by the County Administrative Officer by an order duly entered
 in the minutes of said Board on _____
 County Administrative Officer

By _____ Deputy Clerk

COUNTY OF SANTA CRUZ

REQUEST FOR APPROVAL OF AGREEMENT

TO: **Board of Supervisors**
County Administrative Office
Auditor Controller

FROM: Human Resources Agency (Department)
BY: [Signature] (Signature) [Date] (Date)
Signature certifies that appropriations/revenues are available

AGREEMENT TYPE (Check One)

Expenditure Agreement ☐

Revenue Agreement ☐

The Board of Supervisors is hereby requested to approve the attached agreement and authorize the execution of same.

- Said agreement is between the Human Resources Agency (Department/Agency)
and Project Scout, Inc., 114 East Fifth Street, Watsonville, CA. 95076 (Name/Address)
- The agreement will provide An amendment for special purpose budget augmentation to existing
contract. To implement Board of Supervisors' decision of August 7, 2001.
- Period of the agreement is from July 1, 2001 to June 30, 2002
- Anticipated Cost is \$ 2,090.00 ☐ Fixed ☐ Monthly Rate ☐ Annual Rate ☒ Not to Exceed
Remarks: Prior encumbrance \$2,013.00. Staff: Teresita Hinojosa-Pereira, x4058

5. Detail: ☐ On Continuing Agreements List for FY . Page CC- Contract No: 10756 OR ☐ 1st Time Agreement
- ☐ Section II No Board letter required, will be listed under Item 8
☐ Section III Board letter required
☐ Section IV Revenue Agreement

6. Appropriations/Revenues are available and are budgeted in 395200 (Index) 4670 (Sub object)

NOTE: IF APPROPRIATIONS ARE INSUFFICIENT, ATTACHED COMPLM D AUD-74 OR AUD-60

Appropriations are available and have been encumbered.
are not available and will be encumbered.

Contract No: 10756

By: [Signature]
Auditor Controller Deputy

Date:

Proposal and accounting detail reviewed and approved. It is recommended that the Board of Supervisors approve the agreement and authorize

HRA Administrator (Dept/Agency Head) to execute on behalf of the County of Santa Cruz

Human Resources Agency (Department/Agency)

Date: 10/15/01

By: [Signature]
County Administrative Office

Distribution:

Board of Supervisors - White
Auditor Controller - Canary
Auditor-Controller - Pink
Department - Gold

State of California
County of Santa Cruz

I, ex-officio Clerk of the Board of Supervisors of the County of Santa Cruz,
State of California, do hereby certify that the foregoing request for approval of agreement was ap-
proved by said Board of Supervisors as recommended by the County Administrative Office by an
order duly entered in the minutes of said Board on 20

ADM - 29 (8/01)

Title I, Section 300 Proc Man

By: Deputy Clerk

AUDITOR-CONTROLLER USE ONLY

CO- S
Document No. JE Amount Lines H/TL Keyed By Date 037

TC1: 0 \$ /
Auditor Description Amount Index Sub object User Code

COUNTY OF SANTA CRUZ
REQUEST FOR APPROVAL OF AGREEMENTTO: Board of Supervisors
County Administrative Office
Auditor ControllerFROM: Human Resources Agency (Department)
BY: Theresa Hinojosa (Signature) 9/5/01 (Date)
Signature certifies that appropriations/revenues are available

AGREEMENT TYPE (Check One)

Expenditure Agreement ☐Revenue Agreement ☐

The Board of Supervisors is hereby requested to approve the attached agreement and authorize the execution of same.

1. Said agreement is between the Human Resources Agency (Department/Agency)
and PVUSD/Healthy Start Program, 294 Green Valley Road, Watsonville, CA. 95076 (Name/Address)
2. The agreement will provide An amendment for special purpose budget augmentation to existing
contract. To implement Board of Supervisors' decision of August 7, 2001.
3. Period of the agreement is from July 1, 2001 to June 30, 2002
4. Anticipated Cost is \$ 28,331.00 ☐ Fixed ☐ Monthly Rate ☐ Annual Rate ☒ Not to Exceed
Remarks: Prior encumbrance \$27,282.00. Staff: Teresita Hinojosa-Pereira, x4058
5. Detail: ☐ On Continuing Agreements List for FY - . Page CC- Contract No: 10585 OR ☐ 1st Time Agreement
☐ Section II No Board letter required, will be listed under Item 8
☐ Section III Board letter required
☐ Section IV Revenue Agreement
6. Appropriations/Revenues are available and are budgeted in 395200 (Index) 4637 (Sub object)

NOTE: IF APPROPRIATIONS ARE INSUFFICIENT, ATTACHED COMPLETED AUD-74 OR AUD-60

Appropriations are available and have been encumbered.
are not available and will beContract No: 10585By: Theresa Hinojosa
Auditor-Controller DeputyDate: Proposal and accounting detail reviewed and approved. It is recommended that the Board of Supervisors approve the agreement and authorize
HRA Administrator (Dept/Agency Head) to execute on behalf of the County of Santa CruzHuman Resources Agency (Department/Agency)Date: 10-15-01By: Ed Schaefer
County Administrative Office

Distribution:

Board of Supervisors - White
Auditor Controller - Canary
Auditor-Controller - Pink
Department - GoldState of California
County of Santa CruzI, ex-officio Clerk of the Board of Supervisors of the County of Santa Cruz,
State of California, do hereby certify that the foregoing request for approval of agreement was ap-
proved by said Board of Supervisors as recommended by the County Administrative Office by an
order duly entered in the minutes of said Board on 20 ADM - 29 (8/01)
Title ■ Section 300 Roc Man

By: Deputy Clerk

AUDITOR/CONTROLLER USE ONLY

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TC110						
Auditor Description			Amount	Index	Sub object	User Code

0352

0351

COUNTY OF SANTA CRUZ REQUEST FOR APPROVAL OF AGREEMENT

TO: Board of Supervisors
County Administrative Office
Auditor Controller

FROM: Human Resources Agency (Department)
BY: [Signature] (Signature) 9/25/01 (Date)
Signature certifies that appropriations/revenues are available

AGREEMENT TYPE (Check One)

Expenditure Agreement ☐

Revenue Agreement ☐

The Board of Supervisors is hereby requested to approve the attached agreement and authorize the execution of same.

1. Said agreement is between the Human Resources Agency (Department/Agency)
and Salud Para La Gente, Inc., 204 East Beach Street, Watsonville, CA. 95076 (Name/Address)
2. The agreement will provide An amendment for special purpose budget augmentation to existing contract. To implement Board of Supervisors' decision of August 7, 2001.
3. Period of the agreement is from July 1, 2001 to June 30, 2002
4. Anticipated Cost is \$ 222,140.00 ☐ Fixed ☐ Monthly Rate ☐ Annual Rate ☒ Not to Exceed
Remarks: Prior encumbrance \$213,913.00. Staff: Teresita Hinojosa-Pereira, x4058
5. Detail: ☐ On Continuing Agreements List for FY - . Page CC- Contract No: 10921 OR ☐ 1st Time Agreement
☐ Section II No Board letter required, will be listed under Item 8
☐ Section III Board letter required
☐ Section IV Revenue Agreement
6. Appropriations/Revenues are available and are budgeted in 395200 (Index) 4700 (Sub object)

NOTE: IF APPROPRIATIONS ARE INSUFFICIENT, ATTACHED COMPLETED AUD-74 OR AUD-60

Appropriations are available and have been encumbered.
are not available and will be encumbered.

Contract No: 10921

By: [Signature]
Auditor-Controller Deputy

Date:

Proposal and accounting detail reviewed and approved. It is recommended that the Board of Supervisors approve the agreement and authorize
HRA Administrator (Dept/Agency Head) to execute on behalf of the County of Santa Cruz

Human Resources Agency (Department/Agency)

Date: 10-15-01

By: [Signature]
County Administrative Office

Distribution:

Board of Supervisors - White
Auditor Controller - Canary
Auditor-Controller - Pink
Department - Gold

State of California
County of Santa Cruz

I ex-officio Clerk of the Board of Supervisors of the County of Santa Cruz,
State of California, do hereby certify that the legis request for approval of agreement was ap-
proved by said Board of Supervisors as recommended by the County Administrative Office by an
order duly entered in the minutes of said Board on 20

ADM - 29 (8/01)
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By: Deputy clerk

AUDITOR-CONTROLLER USE ONLY

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Auditor Description	Amount	Index	Sub object	User Code

0354

COUNTY OF SANTA CRUZ REQUEST FOR APPROVAL OF AGREEMENT

TO: Board of Supervisors
County Administrative Office
Auditor Controller

FROM: Human Resources Agency (Department)
BY: [Signature] (Signature) [Date] (Date)
Signature certifies that appropriations/revenues are available

AGREEMENT TYPE (Check One)

Expenditure Agreement ☐

Revenue Agreement ☐

The Board of Supervisors is hereby requested to approve the attached agreement and authorize the execution of same.

- Said agreement is between the Human Resources Agency (Department/Agency)
and Survivors Healing Center, 2301 Mission Street, C-1, Santa Cruz, CA. 95060 (Name/Address)
- The agreement will provide An amendment for special purpose budget augmentation to existing contract. To implement Board of Supervisors' decision of August 7, 2001.
- Period of the agreement is from July 1, 2001 to June 30, 2002
- Anticipated cost is \$ 5,616.00 ☐ Fixed ☐ Monthly Rate ☐ Annual Rate ☒ Not to Exceed
Remarks: Prior encumbrance \$5,408.00 Staff: Teresita Hinojosa-Pereira, x4058
- Detail: ☐ On Continuing Agreements List for FY , Page CC- Contract No: 12236 OR ☐ 1st Time Agreement
☐ Section II No Board letter required, will be listed under Item 8
☐ Section III Board letter required
☐ Section IV Revenue Agreement
- Appropriations/Revenues are available and are budgeted in 395200 (Index) 5191 (Sub object)

NOTE: IF APPROPRIATIONS ARE INSUFFICIENT, ATTACHED COMPLmD AUD-74 OR AUD-60

Appropriations are available and have been encumbered.
are not available and will be

Contr 12236

By: [Signature]
Auditor-Controller Deputy

Date:

Proposal and accounting detail reviewed and approved. It is recommended that the Board of Supervisors approve the agreement and authorize
IRA Administrator (Dept/Agency Head) to execute on behalf of the County of Santa Cruz

Human Resources Agency (Department/Agency)

Date: 10-15-01

By: [Signature]
County Administrative Office

Distribution:

Board of Supervisors - White
Auditor Controller - Canary
Auditor-Controller - Pink
Department - Gold

State of California
County of Santa Cruz

I, ex-officio Clerk of the Board of Supervisors of the County of Santa Cruz,
State of California, do hereby certify that the request for approval of agreement was ap-
proved by said Board of Supervisors as recommended by the County Administrative Office by an
order duly entered in the minutes of said Board on 20

ADM - 29 (8/01)

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By: Deputy clerk

AUDITOR-CONTROLLER USE ONLY

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**COUNTY OF SANTA CRUZ
REQUEST FOR APPROVAL OF AGREEMENT**

TO: **Board of supervisors**
county Administrative Office
Auditor Controller

FROM: Human Resources Agency (Department)
BY: *[Signature]* (Signature) *[Date]* (Date)
Signature certifies that appropriations/revenues are available

AGREEMENT TYPE (Check One)

Expenditure Agreement ☐

Revenue Agreement ☐

The Board of Supervisors is hereby requested to approve the attached agreement and authorize the execution of same.

Said agreement is between the Human Resources Agency (Department/Agency)

and WomenCARE Inc., P.O. Box 944, Santa Cruz, CA. 95061 (Name/Address)

2. The agreement will provide An amendment for special purpose budget augmentation to existing contract. To implement Board of Supervisors' decision of August 7, 2001.

3. Period of the agreement is from July 1, 2001 to June 30, 2002

4. Anticipated Cost is \$ 10,800.00 ☐ Fixed ☐ Monthly Rate ☐ Annual Rate ☒ Not to Exceed

Remarks: Prior encumbrance \$10,400.00 Staff: Teresita Hinojosa-Pereira, x4058

5. Detail: ☐ On Continuing Agreements List for FY - . Page CC- Contract No: 12237 OR ☐ 1st Time Agreement
☐ Section II No Board letter required, will be listed under Item 8
☐ Section III Board letter required
☐ Section IV Revenue Agreement

6. Appropriations/Revenues are available and are budgeted in 395200 (Index) 5191 (Sub object)

NOTE: IF APPROPRIATIONS ARE INSUFFICIENT, ATTACHED COMPLETED AUD-74 OR AUD-60

are have been
Appropriations available and encumbered.
are not will be

Contract No: 12237

By: *[Signature]* Date:
Auditor-Controller Deputy

Proposal and accounting detail reviewed and approved. It is recommended that the Board of Supervisors approve the agreement and authorize

IRA Administrator (Dept/Agency Head) to execute on behalf of the County of Santa Cruz

Human Resources Agency (Department/Agency)

Date: 10-15-01

By: *[Signature]*
County Administrative Office

Distribution:

Board of Supervisors - White
Auditor Controller - Canary
Auditor-Controller - Pink
Department - Gold

State of California
County of Santa Cruz

I, ex-officio Clerk of the Board of Supervisors of the County of Santa Cruz,
State of California, do hereby certify that the foregoing request for approval of agreement was ap-
proved by said Board of Supervisors as recommended by the County Administrative Office by an
order duly entered in the minutes of said Board on 20

ADM - 29 (8/01)
Title I, section 300 Proc Man

By: Deputy Clerk

AUDITOR-CONTROLLER USE ONLY

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