

**BEFORE THE BOARD OF SUPERVISORS
OF THE COUNTY OF SANTA CRUZ, STATE OF CALIFORNIA**

Resolution No.

On the motion of Supervisor

Duly seconded by Supervisor

The following resolution is adopted:

RESOLUTION ACCEPTING UNANTICIPATED REVENUE

WHEREAS, the County of Santa Cruz is the recipient of funds, in the amount of \$ 200,000,
from the City of Santa Cruz and the City of Watsonville,
for the Severe Weather Shelter Service program; and

WHEREAS, the above-referenced funds are either in excess of those anticipated or are not specifically set forth in the current fiscal year budget for the County; and

WHEREAS, pursuant to Government Code section 29130(b), such funds may be made available for specific appropriation by four-fifths vote of the Board of Supervisors;

NOW, THEREFORE, BE IT RESOLVED AND ORDERED that the Santa Cruz County Auditor-Controller-Treasurer-Tax Collector accept the amount of \$ 200,000 for the
Severe Weather Shelter Service program.

GL Key	GL Object	JL Key	JL Object	Amount	Account Description
302150	41150	OXTEMP	OXTEMP	140,000	Disaster Events/Contr. FR other Govt Agencies
302150	41150	OXTEMP	OXTEMP	60,000	Disaster Events/Contr. FR other Govt Agencies

and that such funds be and are hereby appointed as follows:

GL Key	GL Object	JL Key	JL Object	Amount	Account Description
302150	62381	OXTEMP	62381	200,000	Disaster Events/Professional Services

PASSED AND ADOPTED BY THE Board of Supervisors of the County of Santa Cruz, State of California,
this _____ day of _____, _____ by the following vote
(requires four-fifths vote for approval):

AYES:

NOES:

ABSENT:

Chair of the Board


ATTEST: _____
Clerk of the Board

DEPARTMENT HEAD I hereby certify that the fiscal provisions have been researched and that the
Revenue(s) (has been)(will be) received within the current fiscal year.

BY:  DocuSigned by:
5FFF6E6813B1490... Date: 5/27/2025

Department Head

COUNTY ADMINISTRATIVE OFFICER

 DS


/ _____ /

Recommended to Board

/ _____ /

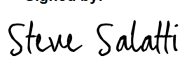
Not Recommended to Board

APPROVED AS TO FORM:

 DocuSigned by:
F0E6ED189D78ABF

Office of the County Counsel

APPROVED AS TO ACCOUNTING DETAIL:

 Signed by:
90ED5DD1E612471

Auditor-Controller-Treasurer-Tax Collector

Distribution:

Auditor-Controller-Treasurer-Tax Collector

County Counsel

County Administrative Officer

Originating Department

Certificate Of Completion

Envelope Id: A985FB25-21F0-43C7-A6D9-0964589A561C

Status: Completed

Subject: Complete with Docusign: AUD60 Resolution rev 11-2020_Severe Weather Shelter.pdf

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Annie Puckett

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701 Ocean Street

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Santa Cruz, CA 95060

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Signer Events

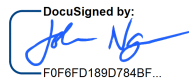
John Nguyen

John.Nguyen@santacruzcountyca.gov

Lead Assistant County County Counsel

Security Level: Email, Account Authentication (None)

Signature

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Sent: 5/27/2025 10:02:36 AM

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Signed: 5/27/2025 11:10:07 AM

Electronic Record and Signature Disclosure:


Accepted: 6/12/2024 8:53:19 AM

ID: cff2bd5b-d3a4-40f2-aa61-cc2de5bbd9e3

Steve Salatti

Steve.Salatti@santacruzcountyca.gov

Security Level: Email, Account Authentication (None)

Signed by:

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Signature Adoption: Pre-selected Style
Using IP Address: 63.194.190.100

Sent: 5/27/2025 11:10:09 AM

Viewed: 5/27/2025 2:25:50 PM

Signed: 5/27/2025 2:27:09 PM

Electronic Record and Signature Disclosure:

Accepted: 8/8/2023 12:05:33 PM

ID: 37022c2d-855d-40d5-8f1e-6b96d88b8301

David Reid

David.Reid@santacruzcountyca.gov

Director, Office of Response, Recovery & Resilience

County of Santa Cruz

Security Level: Email, Account Authentication (None)

DocuSigned by:

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Signature Adoption: Pre-selected Style
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Sent: 5/27/2025 2:27:11 PM

Viewed: 5/27/2025 8:43:03 PM

Signed: 5/27/2025 8:43:07 PM

Electronic Record and Signature Disclosure:

Accepted: 3/4/2022 11:33:51 AM

ID: 07377a74-dfb0-4ba0-b608-933136fad55f

Elissa Benson

Elissa.Benson@santacruzcountyca.gov

Asst County Administrative Officer

County of Santa Cruz

Security Level: Email, Account Authentication (None)

DS


Signature Adoption: Pre-selected Style
Using IP Address: 63.194.190.100

Sent: 5/27/2025 8:43:09 PM

Resent: 5/28/2025 4:12:03 PM

Viewed: 5/28/2025 4:13:35 PM

Signed: 5/28/2025 4:13:47 PM

Electronic Record and Signature Disclosure:

Signer Events	Signature	Timestamp
Accepted: 3/2/2022 2:24:06 PM ID: bf6ba2c1-e526-4a11-81c6-578346afb3a9		
In Person Signer Events	Signature	Timestamp
Editor Delivery Events	Status	Timestamp
Agent Delivery Events	Status	Timestamp
Intermediary Delivery Events	Status	Timestamp
Certified Delivery Events	Status	Timestamp
Carbon Copy Events	Status	Timestamp
Witness Events	Signature	Timestamp
Notary Events	Signature	Timestamp
Envelope Summary Events	Status	Timestamps
Envelope Sent	Hashed/Encrypted	5/27/2025 10:02:36 AM
Certified Delivered	Security Checked	5/28/2025 4:13:35 PM
Signing Complete	Security Checked	5/28/2025 4:13:47 PM
Completed	Security Checked	5/28/2025 4:13:47 PM
Payment Events	Status	Timestamps
Electronic Record and Signature Disclosure		

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- i. decline to sign a document from within your signing session, and on the subsequent page, select the check-box indicating you wish to withdraw your consent, or you may;
- ii. send us an email to nada.algharib@santacruzcounty.us and in the body of such request you must state your email, full name, mailing address, and telephone number. We do not need any other information from you to withdraw consent.. The consequences of your withdrawing consent for online documents will be that transactions may take a longer time to process..

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