

**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 \$ 16,
from Department of Housing and Community Development,
for the HomeKey Round 2 Vets Village - Interest 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 \$ 16 for the
HomeKey Round 2 Vets Village - Interest program.

| GL Key | GL Object | JL Key | JL Object | Amount | Account Description |
|--------|-----------|--------|-----------|--------|----------------------------|
| 133950 | 40544 | | | 16 | ST-HOUSING & COMMUNITY DEV |
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and that such funds be and are hereby appointed as follows:

| GL Key | GL Object | JL Key | JL Object | Amount | Account Description |
|--------|-----------|--------|-----------|--------|---------------------------|
| 133950 | 62381 | | | 16 | PROF & SPECIAL SERV-OTHER |
| | | | | | |
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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:

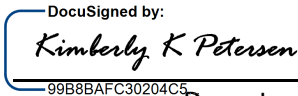
NOES:

ABSENT:

 Chair of the Board

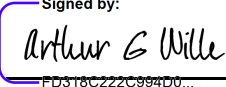
ATTEST: _____
 Clerk of the Board

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.

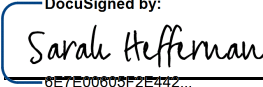
BY:  _____ Date: 5/21/2025
 99B8BAFC30204C5 Department Head

COUNTY ADMINISTRATIVE OFFICER / x / Recommended to Board
 / _____ / Not Recommended to Board

APPROVED AS TO FORM:

 _____ 5/13/2025
 Office of the County Counsel

APPROVED AS TO ACCOUNTING DETAIL:

 _____ 5/12/2025
 Human Services Department on behalf of
 Auditor-Controller-Treasurer-Tax Collector

Distribution:

Auditor-Controller-Treasurer-Tax Collector
 County Counsel
 County Administrative Officer
 Originating Department

Certificate Of Completion

Envelope Id: 045E4201-6623-4ED6-8B00-5F778A4C56DE

Status: Completed

Subject: Complete with Docusign: AUD 60 Interest for Vets Village- BOS Meeting 6/10/2025.pdf

Source Envelope:

Document Pages: 2

Signatures: 3

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Initials: 0

HSD CCU

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Pool: County of Santa Cruz

Location: Docusign

Signer Events

Signature

Timestamp

Sarah Heffernan

Sarah.Heffernan@santacruzcountyca.gov

Admin Services Manager

County of Santa Cruz

Security Level: Email, Account Authentication
(None)

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Sarah Heffernan
6E7E00605F2E442...

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Signature Adoption: Pre-selected Style

Using IP Address: 63.194.190.100

Electronic Record and Signature Disclosure:

Accepted: 3/9/2022 4:31:15 PM

ID: 378f7795-0093-43d4-8a4e-0f330641a11b

Arthur G Wille

arthur.wille@santacruzcountyca.gov

County of Santa Cruz

Assistant County Counsel

Security Level: Email, Account Authentication
(None)

Signed by:

Arthur G Wille
FD318C222C994D0...

Sent: 5/12/2025 1:44:22 PM

Viewed: 5/13/2025 11:23:42 AM

Signed: 5/13/2025 3:00:28 PM

Signature Adoption: Pre-selected Style

Using IP Address: 63.194.190.100

Electronic Record and Signature Disclosure:

Accepted: 5/13/2025 3:00:11 PM

ID: d842e686-03b6-4be7-8361-4a3c84b4aa44

Sven Stafford

Sven.Stafford@santacruzcountyca.gov

Principal Administrative Analyst

County of Santa Cruz

Security Level: Email, Account Authentication
(None)

Completed

Using IP Address: 107.3.146.170

Sent: 5/13/2025 3:00:29 PM

Viewed: 5/13/2025 10:36:21 PM

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Electronic Record and Signature Disclosure:

Accepted: 11/27/2023 4:58:56 PM

ID: f0ba78d6-7235-4933-b064-12c7d346ba1e

Kimberly K Petersen

Kimberly.Petersen@santacruzcountyca.gov

Deputy Director

County of Santa Cruz

Security Level: Email, Account Authentication
(None)

DocuSigned by:

Kimberly K Petersen
99B8BAFC30204C5...

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Electronic Record and Signature Disclosure:

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| 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 | 5/12/2025 11:11:42 AM |
| Certified Delivered | Security Checked | 5/21/2025 6:15:37 PM |
| Signing Complete | Security Checked | 5/21/2025 6:16:03 PM |
| Completed | Security Checked | 5/21/2025 6:16:03 PM |
| Payment Events | Status | Timestamps |
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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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