

**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 \$ 1,026,029,
from General County Revenues,
for the Sheriff-Coroner and Public Defender 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 \$ 1,026,029 for the
Sheriff-Coroner and Public Defender program.

GL Key	GL Object	JL Key	JL Object	Amount	Account Description
592100	40894			551,454	ST-OTHER
662110	42384			474,575	OTHER REVENUE

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

GL Key	GL Object	JL Key	JL Object	Amount	Account Description
592100	62381			151,454	PROF & SPECIAL SERV-OTHER
591000	62386			400,000	PUBLIC DEFENDER/SPECIAL
662405	95200			474,575	INTRA-FUND TRF-CORRECTIONS

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:

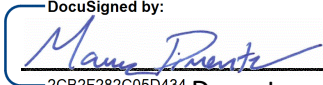
NOES:

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: 6/3/2025
 2CB2F282C05D434 Department Head
 6/10/25 AMS #25-1740

COUNTY ADMINISTRATIVE OFFICER




Recommended to Board


/ _____ /

Not Recommended to Board

APPROVED AS TO FORM:

APPROVED AS TO ACCOUNTING DETAIL:

Signed by:

 Office of the County Counsel
 6/10/25 AMS #25-1740

Signed by:

 Auditor-Controller-Treasurer-Tax Collector
 6/10/25 AMS #25-1740

Distribution:

Auditor-Controller-Treasurer-Tax Collector

County Counsel

County Administrative Officer

Originating Department

Certificate Of Completion

Envelope Id: A27CBC5D-69FC-4E96-884F-98F7B37CC40F

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Envelope Originator:

Marcus Pimentel

701 Ocean Street

Santa Cruz, CA 95060

Marcus.Pimentel@santacruzcountyca.gov

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Marcus.Pimentel@santacruzcountyca.gov

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Signer Events

Marcus Pimentel

marcus.pimentel@santacruzcountyca.gov

County Budget Manager

County of Santa Cruz, CA

Security Level: Email, Account Authentication
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ID: fbe1758b-aead-4cf4-83b3-2b4746e00735

Jason M. Heath

jason.heath@santacruzcounty.us

County Counsel -- Approved as to Form

Security Level: Email, Account Authentication
(None)

Signed by:

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Electronic Record and Signature Disclosure:

Accepted: 6/3/2025 11:03:53 AM

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Steve Salatti

Steve.Salatti@santacruzcountyca.gov

Security Level: Email, Account Authentication
(None)

Signed by:

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Electronic Record and Signature Disclosure:

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Marcus Pimentel

marcus.pimentel@santacruzcountyca.gov

County Budget Manager

County of Santa Cruz, CA

Security Level: Email, Account Authentication
(None)

DS

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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
Lana Martinez Davis Lana.MartinezDavis@santacruzcounty.us Security Level: Email, Account Authentication (None) Electronic Record and Signature Disclosure: Accepted: 8/11/2024 9:10:42 PM ID: eec155f3-4f0f-4a62-93ac-977d9723b7a8	<div>COPIED</div>	Sent: 6/3/2025 12:16:06 PM
Witness Events	Signature	Timestamp
Notary Events	Signature	Timestamp
Envelope Summary Events	Status	Timestamps
Envelope Sent	Hashed/Encrypted	6/3/2025 9:21:15 AM
Certified Delivered	Security Checked	6/3/2025 12:15:55 PM
Signing Complete	Security Checked	6/3/2025 12:16:05 PM
Completed	Security Checked	6/3/2025 12:16:06 PM
Payment Events	Status	Timestamps
Electronic Record and Signature Disclosure		

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You may contact us to let us know of your changes as to how we may contact you electronically, to request paper copies of certain information from us, and to withdraw your prior consent to receive notices and disclosures electronically as follows:

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To let us know of a change in your email address where we should send notices and disclosures electronically to you, you must send an email message to us at nada.algharib@santacruzcounty.us and in the body of such request you must state: your previous email address, your new email address. We do not require any other information from you to change your email address.

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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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