



## RESOLUTION NO.

OF THE BOARD OF SUPERVISORS OF THE COUNTY OF EL DORADO

### APPROVING THE APPLICATION FOR GRANT FUNDS AVAILABLE UNDER THE "HAVA ELECTIONS ASSISTANCE FOR INDIVIDUALS WITH DISABILITIES SECTION 261 PROGRAM"

**WHEREAS**, the Help America Vote Act (HAVA) Section 261 was enacted to require specific polling place accessibility improvements and assistance to individuals with disabilities, and

**WHEREAS**, the Secretary of State has been delegated the responsibility for the distribution of \$12,005.15 in "HAVA Elections Assistance for Individuals with Disabilities Section 261 Program" federal grant funds available to El Dorado County to assist with improvements, training and equipment necessary to implement Section 261 requirements; and

**WHEREAS**, the Secretary of State has established procedures to require the County to certify by resolution the approval of its application before submission of said application to the Secretary of State;

**NOW, THEREFORE, BE IT RESOLVED** that the Board of Supervisors of the County of El Dorado:

1. Approves the filing of an Application for assistance for the above project(s) to be funded from the "HAVA Elections Assistance for Individuals with Disabilities Section 261 Program"; and
2. Certifies the County understands the assurances and certification in the Application form; and
3. Certifies the County has reviewed and understands the Application and procedures which are attached and incorporated here by reference; and
4. Appoints the Recorder-Clerk-Registrar of Voters or his designee as agent to conduct all negotiations, execute and submit all documents including, but not limited to Applications, State of California Standard Agreement with attachments, payment requests and so on, which may be necessary for the completion of the aforementioned project.

**PASSED AND ADOPTED** by the Board of Supervisors of the County of El Dorado at a regular meeting of said Board, held the \_\_\_\_\_ day of \_\_\_\_\_, 200\_\_\_, by the following vote of said Board:

**Attest:**

Cindy Keck  
Clerk of the Board of Supervisors

**Ayes:**

**Noes:**

**Absent:**

By: \_\_\_\_\_  
Deputy Clerk

\_\_\_\_\_  
Chairman, Board of Supervisors

**I CERTIFY THAT:**

THE FOREGOING INSTRUMENT IS A CORRECT COPY OF THE ORIGINAL ON FILE IN THIS OFFICE.

**DATE:** \_\_\_\_\_

**Attest:** CINDY KECK, Clerk of the Board of Supervisors of the County of El Dorado, State of California.

By: \_\_\_\_\_