



RESOLUTION NO.

OF THE BOARD OF SUPERVISORS OF THE COUNTY OF EL DORADO

WHEREAS, this Board has designated itself as the Area Agency on Aging of El Dorado County to carry out a program pursuant to the Older Americans Act of 1965, as amended; and

WHEREAS, Resolution 096-2009 was adopted by this Board on May 12, 2009 authorizing execution of Contract AP-0910-29 with the California Department of Aging for provision of support services for seniors, including various Title III, Title VII and State Funded Community Based Services Programs during the term July 1, 2009 through June 30, 2010, and

WHEREAS, On July 28, 2009 the Governor signed the Amended 2009-10 State Budget Act which eliminates funding for the State's Community Based Service Programs (CBSP) effective September 30, 2009, and

WHEREAS, Amendment 1 to Contract AP-0910-29 reflects the elimination of CBSP funding by reducing the amount payable under said Contract by \$258,420, from \$1,215,025 to \$956,605, and

WHEREAS, the Chairman of the Board can act on behalf of the County of El Dorado and will sign all necessary documents required to execute the contract,

NOW, THEREFORE, BE IT RESOLVED that the Board of Supervisors of the County of El Dorado hereby authorizes the Chairman of the Board to execute Amendment 1 to Contract Number AP-0910-29 with the California Department of Aging, and further authorizes Janet Walker-Conroy, Director of the El Dorado County Area Agency on Aging, or successor, to execute further documents relating to Contract AP-0910-29, including amendments thereto, contingent upon approval by County Counsel and Risk Management, that do not affect the dollar amount or the term, and to sign subsequent required fiscal and programmatic reports, and to perform any and all administrative and other responsibilities in relationship to said Agreement.

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:
Suzanne Allen de Sanchez
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.

Attest: Suzanne Allen de Sanchez, Clerk of the Board of Supervisors of the County of El Dorado, State of California.

By: _____
Deputy Clerk

Date: _____