

1 BOARD OF DIRECTORS
2 LAKE COUNTY SANITATION DISTRICT
3 COUNTY OF LAKE, STATE OF CALIFORNIA
4
5 RESOLUTION NO. _____
6

7 A RESOLUTION CANCELLING FUND 254 LAKE COUNTY SANITATION
8 DISTRICT SOUTHEAST CAPITAL IMPROVEMENT RESERVE DESIGNATION IN
9 THE AMOUNT OF \$102,976
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13 WHEREAS, Government Code section 29130 provides that the governing
14 body may, by a four-fifths (4/5) vote, make restricted fund balance available for
15 appropriation; and
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17 WHEREAS, Lake County Sanitation District Southeast (LACOSAN SE)
18 currently has a restricted fund balance Capital Improvement reserve designation in
19 the amount of \$1,994,911.00; and
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21 WHEREAS, funds were budgeted in FY 18/19 in the amount of \$100,500 for
22 a replacement pump for lift station #1; and
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24 WHEREAS, LACOSAN SE lift station #1 pump had reached the end of its
25 useful life and was in need of immediate replacement; and
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27 WHEREAS, the necessary purchase cannot be delayed until the next regular
28 budget cycle and current appropriations in Budget Unit 8354 are not sufficient to
29 finance the purchase;
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31 NOW, THEREFORE, BE IT RESOLVED by the Board of Directors, Lake County
32 Sanitation District, that the following revisions to the Fiscal Year 2019-20 Adopted
33 Budget of the County of Lake, including reserves, are hereby ordered and approved:
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RESERVE/DESIGNATION ADJUSTMENTS					
Fund	Budget Unit	Budget Unit Title	Account Code	Description	Increase (Decrease)
254	8354	LACOSAN South East	392.15-00	Cancel Capital Improvement Reserve	(102,976)

ADJUSTMENTS TO APPROPRIATIONS					
Fund	Budget Unit	Budget Unit Title	Object Code	Description	Increase (Decrease)
254	8354	LACOSAN South East	783.62-74	Cap. FA-Equipment / Other	102,976

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3 Certified copies of this resolution shall be delivered to the Auditor-Controller/County
4 Clerk and Special Districts Administrator.

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6 THIS RESOLUTION was passed by the Board of Directors of the Lake County
7 Sanitation District at a regular meeting thereof on the _____ day of
8 _____, 2019 by the following vote:
9

10 AYES:

11 NOES:

12 ABSENT OR NOT VOTING:
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15 _____
16 Chair, BOARD OF DIRECTORS
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20 ATTEST: CAROL J. HUCHINGSON
21 Clerk of the Board of Directors
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25 By: _____
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APPROVED AS TO FORM:

ANITA GRANT

County Counsel

By:  _____

AUDITOR-CONTROLLER REVIEW:

Cathy Saderlund

By:  _____