BEFORE THE BOARD OF SUPERVISORS
OF THE COUNTY OF YUBA

RESOLUTION AUTHORIZE THE YUBA COUNTY CLERK-RECORDER-REGISTRAR OF VOTERS TO ENTER INTO AGREEMENT WITH THE CALIFORNIA SECRETARY OF STATE FOR "HAVA POLLING PLACE ACCESSIBILITY TRAINING PROGRAM" & AUTHORIZE CLERK-RECORDER-REGISTRAR OF VOTERS TO EXECUTE DOCUMENTS AS REQUIRED BY THE GRANT AND ANY PERTINENT DOCUMENTS RELATED TO THIS PROGRAM AND AUTHORIZE ACCEPTANCE OF FUNDS	)	**RESOLUTION NO. _____**

WHEREAS, the State of California has made grants available for the purpose of Polling Place Accessibility, Equal Opportunity, Accessibility Training, and Access Information; and

WHEREAS, the Board of Supervisors finds that a vital public interest is served by facilitating voting accessibility, encouraging polling place accessibility training and access to information.

NOW, THEREFORE, BE IT RESOLVED, by the Board of Supervisors of the County of Yuba as follows: That the Clerk/Recorder-Registrar of Voters is hereby authorized to enter into an Agreement with the California Secretary of State for HAVA assistance funds.

BE IT FURHTER RESOLVED by the Board of Supervisors of the County of Yuba as follows: That the Clerk/Recorder-Registrar of Voters is hereby authorized to:

1. Accept an amount not to exceed $20,000 for reimbursement for the period through June 30, 2025
2. Execute documents as required by the Agreement during the stated period
3. Accept and allocate funds for the stated period
4. Amend the Agreement for additional or lesser funding and
5. Execute Amendments or memorandums of understanding developed under this grant.

A copy of the said Agreement, or any amendments thereto, shall be filed in the office of the Clerk of the Board, County of Yuba.

PASSED AND ADOPTED at a regular meeting of the Board of Supervisors of the County of Yuba, State of California on the _____ day of _____, 2024 by the following vote:

AYES:

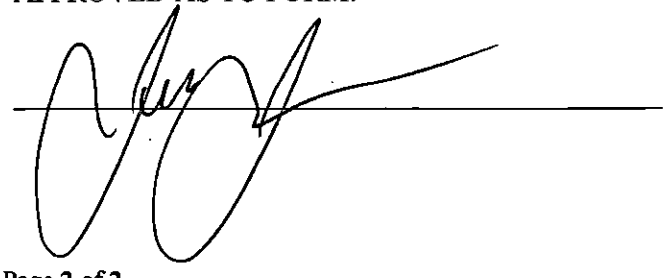
NOES:

ABSENT:

ABSTAIN:

_____
Chair

ATTEST: MARY PASILLAS
CLERK OF THE BOARD OF SUPERVISORS

_____

JOSEPH LARMOUR
YUBA COUNTY COUNSEL
APPROVED AS TO FORM: