

RESOLUTION NO. 2020-_____

RESOLUTION FOR STATE AGREEMENT NUMBER HI-2021-20

On Tuesday _____, 2020, on motion of Supervisor _____, duly seconded by Supervisor _____ and carried, the following resolution is adopted by the Board of Supervisors of San Bernardino County, State of California.

This resolution must be adopted in order to certify the approval of the Governing Board to enter into this transaction with the California Department of Aging for the purpose of providing senior program services, **and to authorize the designated personnel to sign contract documents, including all amendments, for Fiscal Year 2020-21.**

BE IT RESOLVED that the Governing Board of Supervisors of San Bernardino County authorizes entering into a State Agreement Number HI-2021-20 and that the person who is listed below is authorized to sign the transaction for the Governing Board.

<u>NAME</u>	<u>TITLE</u>	<u>SIGNATURE</u>
Curt Hagman _____	Chairman, Fourth District _____	_____
Gary McBride _____	Chief Executive Officer _____	_____
Sharon Nevins _____	Director, Department of Aging and Adult Services _____	_____

PASSED AND ADOPTED by the Board of Supervisors of the County of San Bernardino, State of California, by the following vote:

- AYES: SUPERVISORS:
- NOES: SUPERVISORS:
- ABSENT: SUPERVISORS:

* * * * *

STATE OF CALIFORNIA)
)
 COUNTY OF SAN BERNARDINO) ss.

I, **LYNNA MONELL**, Clerk of the Board of Supervisors of the County of San Bernardino, State of California, hereby certify the foregoing to be a full, true and correct copy of the record of the action taken by the Board of Supervisors, by vote of the members present, as the same appears in the Official Minutes of said Board at its meeting of _____, 2020.

LYNNA MONELL
Clerk of the Board of Supervisors

By _____
Deputy