



# COUNTY OF SONOMA

575 ADMINISTRATION  
DRIVE, ROOM 102A  
SANTA ROSA, CA 95403

## SUMMARY REPORT

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**Agenda Date:** 8/30/2022

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**To:** Board of Supervisors

**Department or Agency Name(s):** Board of Supervisors

**Staff Name and Phone Number:** Supervisor Coursey, (707) 565-2241

**Vote Requirement:** Majority

**Supervisorial District(s):** Third

**Title:**

Fee Waiver

**Recommended Action:**

Approve a Fee Waiver in the amount of \$10,750 by Redwood Empire Food Bank for use of the Santa Rosa Veterans Memorial Building. (Third District)

**Executive Summary:**

This item requests a fee waiver of \$10,750

Redwood Empire Food Bank requests a fee waiver for the use the Santa Rosa Veterans Memorial Building for the operation of food distribution programs for low-income families, children and seniors.

**Discussion:**

None

**Strategic Plan:**

None

**Prior Board Actions:**

FY2018-2019, 10,275; FY 2017-18, \$9,430; FY 2012-13, \$8,435; FY 2011-2012, \$8,490; FY 2010-2011, \$6,186; FY 2009-2010, \$5,157.

**FISCAL SUMMARY**

| <b>Expenditures</b>                | <b>FY 22-23<br/>Adopted</b> | <b>FY 23-24<br/>Projected</b> | <b>FY 24-25<br/>Projected</b> |
|------------------------------------|-----------------------------|-------------------------------|-------------------------------|
| Budgeted Expenses                  | 10,750                      |                               |                               |
| Additional Appropriation Requested |                             |                               |                               |
| <b>Total Expenditures</b>          | <b>10,750</b>               |                               |                               |
| <b>Funding Sources</b>             |                             |                               |                               |
| General Fund/WA GF                 |                             |                               |                               |
| State/Federal                      |                             |                               |                               |
| Fees/Other                         |                             |                               |                               |

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|----------------------|---------------|--|--|
| Use of Fund Balance  |               |  |  |
| Contingencies        | 10,750        |  |  |
| <b>Total Sources</b> | <b>10,750</b> |  |  |

**Narrative Explanation of Fiscal Impacts:**

None

**Narrative Explanation of Staffing Impacts (If Required):**

None

**Attachments:**

Fee Waiver Application

**Related Items "On File" with the Clerk of the Board:**

None