# AGRICULTURE NOOSTRY NO

# **COUNTY OF SONOMA**

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

# SUMMARY REPORT

**Agenda Date:** 7/23/2019

To: Board of Supervisors

Department or Agency Name(s): Board of Supervisors

Staff Name and Phone Number: Supervisor David Rabbitt (707) 565-2241

**Vote Requirement:** Informational Only **Supervisorial District(s):** Countywide

### Title:

Marin/Sonoma Mosquito & Vector Control District Presentation

### **Recommended Actions:**

Accept a presentation by the Marin/Sonoma Mosquito and Vector Control District that provides an overview of the agency including the functions and finances and work done to date in fire recovery zones.

## **Executive Summary:**

The Marin/Sonoma Mosquito and Vector Control District, founded in 1915, protects the health and welfare of the communities it serves from mosquitoes and vector-borne diseases by utilizing cost-effective, environmentally responsible integrated vector management practices.

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### **Prior Board Actions:**

### **FISCAL SUMMARY**

Expenditures	FY 18-19	FY19-20	FY 20-21
	Adopted	Projected	Projected
Budgeted Expenses			
Additional Appropriation Requested			
Total Expenditures			
Funding Sources			
General Fund/WA GF			
State/Federal			
Fees/Other			
Use of Fund Balance			
Contingencies			
Total Sources			

<b>Agenda Date:</b> 7/23/2019		
larrative Explanation of Fiscal Impacts:		
Staffing Impacts:		
Position Title (Payro <b>il/ídashific</b> æt <b>iary</b> ) Range (A - I Step)	Additions (number)	Deletions (number)
rrative Explanation of Staffing Impacts (If Required):		
ttachments:		
elated Items "On File" with the Clerk of the Board:		