

**Before the Board of Supervisors in and for the
County of Monterey, State of California**

Resolution No.: -----

- a. Adopt P-123 Monterey County Catastrophic Leave Donation Program and Donated Leave Bank Policy, and rescind the existing Monterey County Leave Donation Program and Sick Leave Bank Resolution No. 90-484;)
- b. Direct the Human Resources Department and Auditor Controller' Office to take the necessary actions to implement the policy.)

WHEREAS, the County adopted Monterey County Leave Donation Program and Sick Leave Bank Resolution No. 90-484 in 1999 to assist employees who exhausted their own accrued leave due to their own or their immediate family member's medical emergency; and

WHEREAS, the Human Resources Department in consultation with the Office of the County Counsel has updated the Monterey County Leave Donation Program and Sick Leave Bank Policy to prevent negative tax impacts to employees who choose to donate a portion of their accrued leave to the sick leave bank; and

WHEREAS, the Human Resources Department proposes to retitle the Monterey County Leave Donation Program and Sick Leave Bank Policy to Monterey County Catastrophic Leave Donation Program and Donated Leave Bank Policy to ensure the title clearly identifies the purpose of the policy; and

WHEREAS, with the approval of P-123 Monterey County Catastrophic Leave Donation Program and Donated Leave Bank Policy, the Monterey County Leave Donation Program and Sick Leave Bank Resolution No. 90-484 is hereby rescinded

NOW, THEREFORE, BE IT RESOLVED by the Board of Supervisors in and for the County of Monterey as follows:

1. The P-123 Monterey County Catastrophic Leave Donation Program and Donated Leave Bank Policy is approved, and the Monterey County Leave Donation Program and Sick Leave Bank Resolution No. 90-484 is rescinded
2. The Human Resources Department and Auditor Controller's Office are authorized to implement the Monterey County Catastrophic Leave Donation Program and Donated Leave Bank Policy.

PASSED AND ADOPTED on this _____ day of _____, 2021, by the following vote, to wit:

AYES:

NOES:

ABSENT:

I, Valerie Ralph, Clerk of the Board of Supervisors of the County of Monterey, State of California, hereby certify that the foregoing is a true copy of an original order of said Board of

Supervisors duly made and entered in the minutes thereof Minute Book _____, on
_____.

Dated: Valerie Ralph, Clerk of the Board of Supervisors,
County of Monterey, State of California.

By _____
, Deputy