

# **ATTACHMENT 1**

**Monterey County Board of Supervisors  
Referral Submittal Form**

**Referral No. 2021.10**  
**Assignment Date: 05/25/2021**  
(Completed by CAO's Office)

**SUBMITTAL - Completed by referring Board office and returned to CAO no later than noon on Thursday prior to Board meeting:**

Date: 5-20-21	Submitted By: Supervisor Lopez	District #: 3
Referral Title: Investigate the possibility of creating a funding mechanism for agricultural research.		
Referral Purpose: The purpose of this referral is to investigate the legal viability of creating/co-funding research, through industry funded mechanisms, to address challenges within our agricultural community.		
Brief Referral Description (attach additional sheet as required): Impatiens Necrotic Spot Virus (INSV) is a virus spread by thrips, it has devastated large swaths of leafy greens in the Salinas Valley and funding is needed to help fill research positions that can help research appropriate responses and develop resistant varieties. INSV is not the first concern for our local economies largest industry, and it won't be the last. In order to reduce the use of more hazardous chemicals, and safeguard our work force, while supporting our economic base, I would propose that the office of County Counsel investigate the legal frameworks that would allow for a revenue stream to be generated by the local agricultural industry to fund the critical research needed to respond to this challenge and others like it. Generating local investments with stakeholder control of use is critical to allow for a long term, sustainable, funding mechanism that will help mitigate future impacts and quickly respond to emerging challenges.		
<b>Classification - Implication</b>		<b>Mode of Response</b>
<input type="checkbox"/> Ministerial / Minor <input type="checkbox"/> Land Use Policy <input type="checkbox"/> Social Policy <input checked="" type="checkbox"/> Budget Policy <input type="checkbox"/> Other: _____		<input type="checkbox"/> Memo <input type="checkbox"/> Board Report <input checked="" type="checkbox"/> Presentation <b>Requested Response Timeline</b> <input type="checkbox"/> 2 weeks <input checked="" type="checkbox"/> 1 month <input type="checkbox"/> 6 weeks <input type="checkbox"/> Status reports until completed <input checked="" type="checkbox"/> Other: <b>_3 Months_</b> <input type="checkbox"/> Specific Date: _____

**ASSIGNMENT – Provided by CAO at Board Meeting. Copied to Board Offices and Department Head(s) Completed by CAO's Office:**

Department(s): <b>County Counsel</b>	Referral Lead: <b>Les Girard</b>	Board Date: <b>05/25/21</b>
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**REASSIGNMENT – Provided by CAO. Copied to Board Offices and Department Head(s). Completed by CAO's Office:**

Department(s):	Referral Lead:	Date:
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**ANALYSIS - Completed by Department and copied to Board Offices and CAO:**

Department analysis of resources required/impact on existing department priorities to complete referral:	
Analysis Completed By: _____	<b>Department's Recommended Response Timeline</b>
Date: _____	<input type="checkbox"/> By requested date <input type="checkbox"/> 2 weeks <input type="checkbox"/> 1 month <input type="checkbox"/> 6 weeks <input type="checkbox"/> 6 months <input type="checkbox"/> 1 year <input type="checkbox"/> Other/Specific Date: _____

**REFERRAL RESPONSE/COMPLETION - Provided by Department to Board Offices and CAO:**

Referral Response Date:	Board Item No.:	Referrals List Deletion:
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