Monterey County Board of Supervisors Referral Submittal Form

Referral No. 2024.09 **Assignment Date: 8/13/24** (Completed by CAO's Office)

SUBMITTAL - Completed by re	erring Board office and	d returned to CAO no	later than	10:00AM on
Wednesday prior to Board meeti	ng:			

Date:	Submitted By: Supervisor	Glenn Church	District #: 2						
August 1, 2024	of Supervisors Abstentions								
		re the County Code to all	ow County Supervisors' abstentions to						
Referral Purpose: This Referral proposes to change the County Code to allow County Supervisors' abstentions to be recorded as such.									
oe recorded as such.									
Brief Referral Description (attach additional sheet as required):									
Current County Ord									
			ally required by law or requested by a						
			son may order the item unanimously						
			o does not vote in an audible voice						
	shall be recorded as "Aye." In the event a member abstains from voting, his or her vote shall be counted as a vote with the greater number voting for or against a motion, resolution, etc.								
(Ord 2523 § 1 Ch. 4]		st a motion, resolution, et	C.						
	ituie 10, 1979)								
Change Proposal:									
We propose modifying the County Code of Ordinances, (Ord 2523 § 1 Ch. 4 Rule 16, 1979) to allow any									
abstention from voting by a Supervisor to be recorded as an abstention rather than being counted with the									
majority decision. Currently, the only way that an abstention can be recognized is when the vote is 2 yays-2 nays-1 abstention. Then, the vote is considered tied, and the matter is not decided. A Supervisor might abstain									
from a vote for several legitimate, even legal reasons, but under the current ordinance, the reason for their action may not be reflected in Board records, rendering those records less accurate.									
action may not be let	rected in Board records, ren	idering those records less	accurate.						
677									
	cation - Implication		Mode of Response						
☐ Ministerial / N			Board Report X Presentation						
☐ Land Use Poli	cy Requested Response Timeline								
☐ Social Policy			\Box 2 weeks X 1 month \Box 6 weeks						
☐ Budget Policy			☐ Status reports until completed						
A Other: Count	X Other: County Code Modification		☐ Other: ☐ Specific Date:						
	· ·	Meeting. Copied to Boar	d Offices and Department Head(s)						
Completed by CAO		1.T. 1.C. D1'. 1	D 1D 4 0/12/24						
Department(s): Count	ty Counsel Refe	erral Lead: Susan Blitch	Board Date: 8/13/24						
REASSIGNMENT – Provided by CAO. Copied to Board Offices and Department Head(s). Completed by									
CAO's Office:									
Department(s): Referral Lea									
	Refe	erral Lead:	Date:						
Beparament (s).	Refe	rral Lead:	Date:						
1	Refe								

Department analysis of resources requir	ed/impact on	existing depart	ment prioritie	s to complete referral:				
Analysis Completed By:		Department's Recommended Response Timeline						
		☐ By requested date						
		□ 2 weeks	\Box 1 month	\Box 6 weeks \Box 6 months				
Date:		□ 1 year	☐ Other/Spe	cific Date:				
REFERRAL RESPONSE/COMPLETION - Provided by Department to Board Offices and CAO:								
Referral Response Date:	Board Item No.:		Referrals List Deletion:					

Note: Please cc Claudia Escalante and Karina Bokanovich on all CAO correspondence relating to referrals.