



Legislation Text

File #: 24-2442, **Version:** 1

Department: Commissioner, Precinct 3

Department Head/Elected Official: Tom S. Ramsey, P.E., Commissioner

Regular or Supplemental RCA: Regular RCA

Type of Request: Donation

Project ID (if applicable):

Vendor/Entity Legal Name (if applicable):

MWDBE Contracted Goal (if applicable): N/A

MWDBE Current Participation (if applicable): N/A

Justification for 0% MWDBE Participation Goal: N/A - Goal not applicable to request

Request Summary (Agenda Caption):

Request for approval to accept from Samuel Charles Tsen, Jr., the donation of a 30-gallon Nuttall Oak tree, a 30-gallon White Fringe tree and a 45-gallon Magnolia "Little Gem" with an estimated value of \$695 to be utilized at Mercer Botanic Gardens in memory of Christina Boller Tsen.

Background and Discussion:

N/A

Expected Impact:

N/A

Alternative Options:

N/A

Alignment with Goal(s):

- ☐ Justice and Safety
- ☐ Economic Opportunity
- ☐ Housing
- ☐ Public Health
- ☐ Transportation
- ☐ Flooding
- ☐ Environment

X Governance and Customer Service**Prior Court Action** (if any):

| Date | Agenda Item # | Action Taken |
|------|---------------|--------------|
| | | |

Location:

Address (if applicable):

Precinct(s): Precinct 3

Fiscal and Personnel Summary

| | | | | |
|--------------|---------------------------------|------------------|--------------|---------------------------|
| Service Name | | | | |
| | Current Fiscal Year Cost | | | Annual Fiscal Cost |
| | Labor | Non-Labor | Total | Recurring Expenses |

Funding Sources**Existing Budget**

| | | | | |
|-----------------------------|----|----|----|----|
| Choose an item. | \$ | \$ | \$ | \$ |
| Choose an item. | \$ | \$ | \$ | \$ |
| Choose an item. | \$ | \$ | \$ | \$ |
| Total Current Budget | \$ | \$ | \$ | \$ |

Additional Budget Request (*Requires Fiscal Review Request Form*)

| | | | | |
|--|----|----|----|----|
| Choose an item. | \$ | \$ | \$ | \$ |
| Choose an item. | \$ | \$ | \$ | \$ |
| Choose an item. | \$ | \$ | \$ | \$ |
| Total Additional Budget Request | \$ | \$ | \$ | \$ |
| Total Funding Request | \$ | \$ | \$ | \$ |

Personnel (Fill out section only if requesting new PCNs)

| | | | | |
|------------------------------------|---|---|---|---|
| Current Position Count for Service | - | - | - | - |
| Additional Positions Request | - | - | - | - |
| Total Personnel | - | - | - | - |

Anticipated Court Date: April 23, 2024**Anticipated Implementation Date** (if different from Court date):**Emergency/Disaster Recovery Note:** Not an emergency, disaster, or COVID-19 related item**Contact(s) name, title, department:** Conrad Joe, Administrative Assistant**Attachments** (if applicable):