MINUTES OF THE BOARD OF SUPERVISORS COUNTY OF RIVERSIDE, STATE OF CALIFORNIA



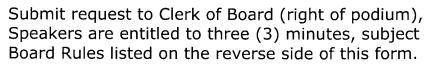
<u>3.1</u>

On motion of Supervisor Stone, seconded by Supervisor Benoit and duly carried by unanimous vote, IT WAS ORDERED that the recommendation from Supervisor Stone regarding Ordinance 914 relating to the reimbursement of incarceration costs and incorporating by reference penal code section 1203, 1c is approved as introduced with waiver of reading.

I hereby certify entered on	hat the foregoing is a full true, and correct copy of an order made and November 8, 2011 of Supervisors Minutes.
(seal)	WITNESS my hand and the seal of the Board of Supervisors Dated: November 8, 2011 Kecia Harper-Ihem, Clerk of the Board of Supervisors, in and for the County of Riverside, State of California.
	By: All Deputy AGENDA NO.
	3.1

xc: Supvr. Stone, COB

Riverside County Board of Supervisors Request to Speak



Support	Oppose	Neutral
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Support	Oppose	Neutral
_	ar" (non-appealed)	_
PLEASE STATE YOU	JR POSITION BELOV	V:
Date: 11-8-11	Agenda #	3,]
Phone #:	· · · · · · · · · · · · · · · · · · ·	•
City:	Zip:	
(only if fo	ollow-up mail response	requested)
Address:		
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Riverside County Board of Supervisors Request to Speak

Submit request to Clerk of Board (right of podium), Speakers are entitled to three (3) minutes, subject Board Rules listed on the reverse side of this form.					
SPEAKER'S NAME: (& SERT MABEE					
Address: 3086 M160eL St (only if follow-up mail response requested)					
City: <u>Pivelsine</u> Zip: 92506					
Phone #: 788 4858					
Date: //- % - // Agenda #					
PLEASE STATE YOUR POSITION BELOW:					
Position on "Regular" (non-appealed) Agenda Item:					
SupportOpposeNeutral					
Note: If you are here for an agenda item that is filed for "Appeal", please state separately your position on the appeal below:					
SupportOpposeNeutral					
I give my 3 minutes to:					

Riverside County Board of Supervisors Request to Speak



Submit request to Clerk of Board (right of podium), Speakers are entitled to three (3) minutes, subject Board Rules listed on the reverse side of this form.

Board Rules listed of	on the reverse side	of this form.		
SPEAKER'S NAME:	JULIE	WALTZ		
Address: (only if fo				
City:	Zip:			
Phone #:	<u> </u>			
Date: 11-7-1)	Agenda #	3.		
PLEASE STATE YOU	JR POSITION BELO	W:		
Position on "Regula	ar" (non-appealed	d) Agenda Item:		
Support	Oppose	Neutral		
Note: If you are here for an agenda item that is filed for "Appeal", please state separately your position on the appeal below:				
Support	Oppose	Neutral		
I give my 3 minute	s to:			