



Contra  
Costa  
County

To: Board of Supervisors

From:

Date: January 31, 2011

Subject: Redistricting Plan

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**RECOMMENDATION(S):**

**FISCAL IMPACT:**

**BACKGROUND:**

**CONSEQUENCE OF NEGATIVE ACTION:**

**CHILDREN'S IMPACT STATEMENT:**

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☒ APPROVE

☐ OTHER

☒ RECOMMENDATION OF CNTY  
ADMINISTRATOR

☐ RECOMMENDATION OF BOARD  
COMMITTEE

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Action of Board On: **01/31/2011** ☐ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF  
SUPERVISORS**

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: January 31, 2011

Contact: .

, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

cc:



## ATTACHMENTS

Redistricting Powerpoint  
Presentation

Redistricting Report