NOTICE OF EXEMPTION

County of Santa Barbara Clerk of the Board of Supervisors

TO:

FROM:	Michael Soderman, Chief Financial and Administrative Office (on behalf of John T. Savrnoch, District Attorney)	
requirements of	r activity identified below is determined to be exempt from further environmental review of the California Environmental Quality Act (CEQA) of 1970 as defined in the State and lines for the implementation of CEQA.	/ 1
APN(s): N/A	Case No.: N/A	
Location: Cou	unty of Santa Barbara	
Project Title: (XC) Program	California Governor's Office of Emergency Services (Cal OES) County Victim Services Grant.	;
Project Descr Attorney's Off	ription: The XC Grant Program is funded by Cal OES, and has been awarded to the District fice for advocacy and outreach to victims in Santa Barbara County.	
-	Ministerial Statutory Categorical Exemption Emergency Project Not a Project: Section 15378(b)(4) Other	
creation of gov	CEQA Guideline Section: Section 15378(b)(4); the actions are not a project as they are the vernment funding mechanisms or other government fiscal activities which do not involve any any specific project which may result in a potentially significant impact on the environment.	
applying for an requesting that	Ipport exemption findings: The Santa Barbara County Office of the District Attorney is and anticipates being awarded grant funding for the XC program. The District Attorney is the Board authorize the District Attorney to execute the grant agreement, if awarded. The Services (XC) Program provides outreach to victims of violent crime within the community.	
White.	Lolla 11/30/23	
Michael Soderi	man, Chief Financial and Administrative Officer Date ivision Representative	
Acceptance Da	te (date of final action on project):	
Date Filed by C	County Clerk:	
Distribution: (fo	or posting six days prior to action, and posting original after approval)	



2023 CEQA Transmittal Memorandum

County of Santa Barbara - Clerk of the Board of Supervisors

105 E. Anapamu St. Room 407 • Santa Barbara • CA • 93101 (805) 568-2240

POTORE	(803) 308-2240				
Complete this form when filing a Notice of Determine Environmental Impact Report) or Notice of Exempt	nation (Negative Declaration, Mitigated No	egative Dec	laration,		
A scanned copy of the Department of Fish and Wild date/time of posting will be emailed to the Lead Age extra copy along with a pre-addressed, stamped enveloped to the control of the cont	ency and Project Applicant. If you would li	the CEQA	filing including the copy, please submit an		
Contact Person		Phone			
John DeAlba		x82434			
Lead Agency					
County of Santa Barbara	ı	Lead Agency Email jodealba@countyofsb.org			
Project Title	1	Jouean			
Cal OES County Victim Ser	vices Program (XC)				
Project Applicant	Email	Phone	e		
County of Santa Barbara District Attorney	jodealba@countyofsb.org	x82434			
Project Applicant Address	City	State	Zip		
1112 Santa Barbara St	Santa Barbara	CA	93101		
DOCUM	IENT BEING FILED:				
☐ Notice of Determination - Environmental Impa	ct Report (EIR)	•••••			
□ 2023 Filing Fee					
☐ Previously Paid (must attach receipt)					
☐ No Effect Determination (must be attache					
Environmental Filing Fees will be collected only			*		
☐ This project has been approved. Date of					
☐ Notice of Determination - Negative Declaration	(ND) or Mitigated Negative Declaration (I	MND)			
☐ 2023 Filing Fee		•••••	\$2,764.00		
☐ Previously Paid (must attach receipt)		•••••	\$0.00		
☐ No Effect Determination (must be attache	ed)	•••••	\$0.00		
Environmental Filing Fees will be collected only	for projects that are approved. The Applicar	nt must atte:	st to the following:		
☐ This project has been approved. Date of A	Approval: Click or tap to enter a date.		-		
□ Notice of Exemption			\$0.00		
■ County Administrative Handling Fee (required	for all filings, effective 7/19/18)		\$50.00		
		TOTA	_{AL:} \$ 50.00		
PAYMENT METHOD: ALL APPLIC	CABLE FEES MUST BE PAID AT THE				
☐ Cash ☐ Credit ☐ Check # In person only	■ Journal Entry In FIN send to	4 COB CE	QA' in CEO Dept		
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The residual for the first of t		Prin	•	StartOver	Sa	ve
		RECEIPT	NIIM	RER.		
	RECEIPT NUMBER: 42 — 12/13/2023 — 348					
	STATE CLEARINGHOUSE NUMBER (If applicable)					
SEE INSTRUCTIONS ON DEVERSE. TYPE OF PRINT OF TARKY		0.7.112.00		10110002110	moer (n a)	орисавис
SEE INSTRUCTIONS ON REVERSE. TYPE OR PRINT CLEARLY. LEAD AGENCY	LEADAGENCY EMAIL			DATE		
County of Santa Barbara	jodealba@countyofsb.org			12/13/2023		
COUNTY/STATE AGENCY OF FILING	, erroring Good in yorks	,.org		DOCUMENT N		***
Santa Barbara				DOCOMENT	NOMBER.	
PROJECT TITLE						
Cal OES County Victim Services Program (XC) PROJECT APPLICANT NAME	PROJECT APPLICANT E	MAN!		DI IONE NUME) CD	
County of Santa Barbara District Attorney				PHONE NUMBER		
PROJECT APPLICANT ADDRESS	jodealba@countyofs					
1112 Santa Barbara St	Santa Barbara	STATE ZIP CODE				
PROJECT APPLICANT (Check appropriate box)	Santa Darbara	CA	l	93101		
Local Public Agency School District	Other Special District	☐ Sta	ate Ag	encv	Private	Entity
CHECK APPLICABLE FEES:						
Environmental Impact Report (EIR)	:	\$3,839.25	\$_			0.00
☐ Mitigated/Negative Declaration (MND)(ND)		\$2,764.00	\$_			0.00
☐ Certified Regulatory Program (CRP) document - payment due di	rectly to CDFW	\$1,305.25	\$	W		0.00
 Exempt from fee Notice of Exemption (attach) CDFW No Effect Determination (attach) Fee previously paid (attach previously issued cash receipt copy) 	·					
☐ Water Right Application or Petition Fee (State Water Resources Control Board only)			\$			0.00
☐ County documentary handling fee			\$			50.00
☐ Other			\$			
PAYMENT METHOD:			_			
☐ Cash ☐ Credit ☐ Check ☑ Other	TOTAL RE	CEIVED	\$ _			50.00
SIGNATURE	Y OF FILING PRINTED NA	ME AND TIT	LE			
X X office Quality Kathe	rine Douglas, Deputy	Clerk				