



Gaston County

Gaston County
Board of Commissioners
www.gastongov.com

Hope United Survivor Network Board Action

File #: 21-408

Commissioner Brown - Hope United Survivor Network - To Accept and Appropriate Fund Balance for the Carry Forward of the July 2020 through September 2021 Donations for The Cathy Mabry Cloninger Center, The Lighthouse and Hope United Survivor Network in the amount of \$98,187

STAFF CONTACT

Tara Joyner - Director of Hope United Survivor Network - 704-862-6783

BUDGET IMPACT

Appropriate donated revenues. No additional county funds.

BUDGET ORDINANCE IMPACT

Increase revenues by \$98,187.00 and appropriate \$88,714.17 to The Cathy Mabry Cloninger Center, \$7,896.83 to The Lighthouse (Child Advocacy Center), \$1,051.00 to The Lighthouse (Kara's Klostet), and \$525.00 to Hope United Survivor Network.

BACKGROUND

Between July of 2020 and September of 2021, Gaston County citizens and organizations donated a total of \$98,187.00 to Hope United Survivor Network, The Cathy Mabry Cloninger Center, and The Lighthouse. The funding must be appropriated in the FY22 Budget in order to be used as intended by donors.

POLICY IMPACT

N/A

ATTACHMENTS

Budget Change Request (BCR)

DO NOT TYPE BELOW THIS LINE

I, Donna S. Buff, Clerk to the County Commission, do hereby certify that the above is a true and correct copy of action taken by the Board of Commissioners as follows:

NO.	DATE	M1	M2	CBrown	AFrale	BHovis	KJohnson	TKeigher	TPhillbeck	RWorley	Vote
2021-314	11/09/2021	TP	KJ	A	AB	A	A	A	A	A	U

DISTRIBUTION:

Laserfiche Users

A=AYE, N=NAY, AB=ABSENT, ABS=ABSTAIN, U=UNANIMOUS

GASTON COUNTY BUDGET CHANGE REQUEST

TO: Dr. Kim S. Eagle COUNTY MANAGER

FROM: 5810 Hope United Survivor Network
Dept. # Department Name

Tara Joyner 10/19/2021
Department Director's Name Date

TYPE OF REQUEST:

☒

Line Item Transfer Within Department & Fund

☐

Line Item Transfer Between Funds *

☐

Project Transfer Within Department & Fund

☒

Additional Appropriation of Funds *

☐

Line Item Transfer Between Departments *

* Requires resolution by the Board of Commissioners

ACCOUNT DESCRIPTION (As it appears in the budget)	ACCOUNT NUMBER	AMOUNT
	Fund - Function - Dept - Division - Object -Project	Whole Dollars Only
	xxx - xx - xxxx - xxxx - xxxxx - xxxxxx	(See Note Below)
Fund Balance Appropriated	010-99-9900-0000-490000	(\$86,110.10)
Donations (Shelter Revenue)	010-05-5810-5582-415001-	(\$2,604.07)
Donations (Shelter Expense)	010-05-5810-5582-560000-08162	\$88,714.17
Fund Balance Appropriated	010-99-9900-0000-490000	(\$8,834.50)
Donations (CAC Revenue)	010-05-5810-5585-415001	(\$113.33)
Donations (CAC Expense)	010-05-5810-5585-560000-16282	\$7,896.83
Kara's Klost Donations	010-05-5810-5585-560000-20045	\$1051.00
Fund Balance Appropriated	010-99-9900-0000-490000	(\$525.00)
Donations (HUSN Expense)	010-05-5810-0000-560000-22218	\$525.00

JUSTIFICATION FOR REQUEST:

Appropriate donation funds from FY21 and FY22 through September 30th, 2021 for Hope United Survivor Network, the Cathy Mabry Cloninger Center and the Lighthouse to expend as needed. All funds are unrestricted.

Note: Decreases in expenditures & increases in revenue accounts require brackets. Increases in expenditures & decreases in revenue do not require brackets. Please note that transfers between funds require interfund transfer accounts.