

Gaston County

DHHS - Social Services Division

Board Action

File #: 22-501

Commissioner Brown - DHHS (Social Services Division) - To Accept and Appropriate the Health Promotion Disease Prevention Grant from Centralina Council of Governments Area Agency on Aging (Grant Funds \$4,500 - Required County Match Funds \$500)

STAFF CONTACT

Lara Gurganus - Adult and Aging Administrator - 704-862-7663

BUDGET IMPACT

Appropriate \$4,500 in Federal revenues along with \$500 of additional County funds.

BUDGET ORDINANCE IMPACT

Increase Federal revenues by \$4,500 and appropriate \$5,000 into Special Programs account.

BACKGROUND

Gaston County Adult and Aging Program has received a Health Promotion Disease Prevention Grant from Centralina Council of Governments Area Agency on Aging in the amount of \$4,500. This Grant will be matched by \$500 in County funds. The Grant funds will be used to provide training to older adults to promote healthy living including a Matter of Balance and Living Healthy with Chronic Illnesses.

POLICY IMPACT

N/A

ATTACHMENTS

Budget Change Request (BCR)

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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	CCloninger	r AFraley	BHovis	KJohnson TKeigher CRWorley Vote					
2022-385	12/13/2022	BH	KJ	Α	А	Α	Α	A A					
DISTRIBL Laserfiche								$\sum_{i=1}^{n} \frac{1}{i} \sum_{j=1}^{n} \frac{1}{i} \sum_{j$					

	BUD	GASTON CO GET CHANGE RE		(BCR)	
то:		Dr. Kim S. Eagle			२
FROM:	CSS	Social Services			
	Dept. Code	Department	Name	-	
		Angela Karchmer	11/17/2	2	
	De	epartment Director	Date		
REQUEST TYPE:					
Line-Item Transfer	Within Der	partment & Fund	Line-	-Item Transfer Betwee	en Funds*
Project Transfer W	/ithin Depar	tment & Fund	🖌 Addir	tional Appropriation o	f Funds*
Line-Item Transfer	Between D)epartments	* Req	uires resolution by the Boa	Ird of Commissioners
ACCOUNT DESCRIPTION		ACCOUNT	NUMBER		AMOUNT**
As it appears in Munis	4	3 3 5 6	7 4	265	Whole dollars only
Ex. Employee Training	Fund XXXX EX.	Dept Div SubDiv Prog XXX XXX XXXX XXXXX (. 1000-BGT-000-00000-000	SubProg Future XXXXXX XXXX 1000-0000000-0	Func Obj Proj xx xxxxxx xxxxx 000-01-520011-	Ex. \$5,000 Ex. (\$5,000)
FY23 Health Promotion Grant	1000-CS	S-272-00000-AdtSvc-00000	0000-G0057	(4,500	
Fund Balance Appropriations	1000-ND	P-000-00000-FBApro-00000	0000-	(500	
FY23 Health Promotion Grant	1000-CS	S-272-00000-AdtSvc-00000	0002-G0057	5,000	
JUSTIFICATION FOR REQU	 JEST:				
The DHHS Social Services Adult an Centralina Council of Government ir					

population in Gaston County. These funds require appropriation to the FY2022-2023 Social Services Budget, so the funds can be used for the intended purpose. The funds are Federal funds and require a 10% County match of \$500.

** Decreases in expenditures and increases in revenue accounts require brackets. Increases in expenditures and decreases in revenue do not require brackets. Please note that transfers between funds require inter-fund transfer accounts.