

Gaston County

Gaston County Board of Commissioners www.gastongov.com

DHHS - Public Health Division Board Action

File #: 16-468

Commissioner Price - To Accept and Appropriate Additional State Grant Funds Received from the NC Division of Public Health for the Healthy Beginnings Program (100% Grant Funds - \$100)

STAFF CONTACT

Cynthia Stitt - Public Health Nursing Administrator - DHHS - Public Health Division - 704-853-5013

BUDGET IMPACT

Appropriate 100% State Grant Revenue.

BUDGET ORDINANCE IMPACT

Increase State Grant revenue by \$100 and appropriate \$100 into Special Programs account.

BACKGROUND

The Gaston County Department of Health and Human Services - Public Health Division received additional State Grant funds from the NC Division of Public Health for the Healthy Beginnings Program. The Healthy Beginnings Program works with minority populations to lower infant mortality and low birth-weight rates. The funds will be used for Healthy Beginnings case management services and educational and outreach activities. These are Non-County funds.

POLICY IMPACT

N/A

ATTACHMENTS

Laserfiche Users

Budget Change Request

I, Donna S. Buff, Clerk to the County Commission, do hereby certify that the above is a true taken by the Board of Commissioners as follows: Vote Keigher Phlibeck Fraley DATE Brown Carpenter NO. U AB Α A AB 2016-257 09/27/2016 CB JC Α Α **DISTRIBUTION:**

	GA	STON COUNTY BU	OGET CHAI	NGE REQUEST		
TO: _	Earl Mathers		COUNTY	MANAGER		
FROM: _	5100 Dept. #	DHHS - Public Heal Department Name				
D	epartment Dire	ctor's Signature	Date			
PE OF REQUES	T:					
Line Item Tra	ansfer Within Depa	rtment & Fund		ine Item Transfer Between	Funds *	
Project Trans	sfer Within Departn	nent & Fund	X	Additional Appropriation of	Funds *	
Line Item Tra	ınsfer Between De	partments*	<u>* 1</u>	Requires resolution by the	Board of Commissioners	
			Resolution	on# [Date	
ACCOUNT DESCRIPTION (As it appears in the budget		ACCOUNT NUI Fund - Dept - Subdept - Div XX - XXXX - XXXX - XXXX 11-5100-5150-5151-32	- Acct - Subacct	PROJECT SUBPROJECT xxxxx - xxxx	AMOUNT Whole Dollars Onl (See Note Below)	
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ROVAL SIGNA	TURES:					
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Decreases in eaulie	xpenditures & in	creases in revenue account e note that transfers between	ts require brack	kets. Increases in exp		