

Gaston County

Gaston County Board of Commissioners www.gastongov.com

Cooperative Extension Board Action

File #: 19-233

Commissioner Keigher - Cooperative Extension - To Accept and Appropriate \$12,662 in Extension Fees and Donations (Registration - \$9,601; Donations - \$3,061)

STAFF CONTACT

David Fogarty - Cooperative Extension - 704-922-2130

BUDGET IMPACT

Increase revenues by \$12,662 and appropriate \$12,662 into Special Programs account. No additional County funds.

BUDGET ORDINANCE IMPACT

N/A

BACKGROUND

This request is to accept and appropriate the following fees and donations into Cooperative Extension special program accounts:

- 4-H fees for 2019 Summer Camps (\$5,127)
- Master Gardener and FCS training fees (\$3,924)
- Donations for Extension's 2019 Somethin' Pumpkin Event (\$3,061)
- Fees paid by Schools for Extension's Healthy Harvest gardening program (\$550)

POLICY IMPACT

N/A

ATTACHMENTS

Budget Change Request

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	JBrown	AFraey	BHovis	"TKeigher TPhillipck HWorley	Vote			
2019-174	06/25/2019	TK	AF	AB	A	Α	A	A AB A	U			
DISTRIBU								The state of the s				

	G	ASTON C	OUNTY BUDGET CH	IANGE REQUEST			
TO:	Earl M	lathers	COUNTY MANAGER				
FROM:	4950	NC Co	operative Extension				
1110111.	Dept. #	• • • • • • • • • • • • • • • • • • • •	partment Name	_			
	David Fogarty		5/23/2019	4			
	Department Di	rector's Name		<u></u>			
TYPE OF REQUE	EST:						
Line Item	Transfer Within De	partment & Fun	d	Line Item Transfer Betwee	n Funds *		
Project Tr	ransfer Within Depa	artment & Fund	х	Additional Appropriation o	of Funds *		
Line Item	Transfer Between	Departments*		* Requires resolution by the	Board of Commissioners		
			ACCOUNT	NUMBER	AMOUNT		
ACCOL	JNT DESCRIPTION	ON	Fund - Function - Dept - Division - Object - Project		Whole Dollars Only		
(As it ap	pears in the budg	aet)	xxx - xx - xxxx - xxxx - xxxxx - xxxxxx		(See Note Below)		
4-H Local Progra			010-07-4950-4952-410009-16276		[5,127]		
4-H Programs			010-07-4950-4952-5600		5,127		
Fee Based Prog	:Food/Supplies		010-07-4950-4950-4150		[3,924]		
Fee Based Prog			010-07-4950-4950-5600	00-15226	3,924		
Something Pum	pkin		010-07-4950-4950-4150	13-17272	[3,061]		
Something Pum	kin		010-07-4950-4950-5600	00-17272	3,061		
Healthy Harvest			010-07-4950-4950-4150	13-18134	[550]		
Healthy Harvest			010-07-4950-4950-5600		550		
JUSTIFICATION F	OR REQUEST:						
This request is to accounts:	o accept and ap	propriate the	e following fees and donat	ions into Cooperative Ex	tension special program		
	er and FCS trai	ning fees (\$3 9 Somethin' I		gram (\$550)			
Note: Decreases revenue do not rec	in expenditures quire brackets. P	& increases in lease note that	n revenue accounts require tt ransfers between funds re	brackets. Increases in equire interfund transfer acc	expenditures & decreases in counts.		