

Gaston County

Gaston County Board of Commissioners www.gastongov.com

Hope United Survivor Network Board Action

File #: 23-184

Commissioner Brown - Hope United Survivor Network - To Accept and Appropriate Additional Grant Funds from The Duke Endowment through the Children's Advocacy Centers of North Carolina and the South Carolina Network of Children's Advocacy Centers in the Amount of \$15,000.00 Awarded to the Lighthouse of Gaston County

STAFF CONTACT

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

BUDGET IMPACT

Appropriate State revenues. No additional County funds.

BUDGET ORDINANCE IMPACT

N/A

BACKGROUND

Through a grant from The Duke Endowment, the Children's Advocacy Centers of North Carolina and the South Carolina Network of Children's Advocacy Centers are collaborating on a project to provide Trauma-Focused Cognitive Behavioral Therapy (TF-CBT) training to Children's Advocacy Center associated therapists in North Carolina and South Carolina. Funds in the amount of \$15,000.00 are being provided to participating CACs for therapist training time.

POLICY IMPACT

N/A

ATTACHMENTS

Laserfiche Users

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: **CCloninger AFraley B**Hovis KJohnson TKeigher Vote NO. DATE M1 M2 **CBrown** U 04/25/2023 BH KJ Δ Α Α Α 2023-138 **DISTRIBUTION:**

GASTON COUNTY BUDGET CHANGE REQUEST (BCR)

TO: _		Dr. Kim S. Eagle		COUNTY MANAGER		
FROM	VI : 5810	5810 Hope United Survivor				
	Dept. Code	Department	Department Name		İ	
		Tara Joyner	04/10/202	123		
	Depa	artment Director	Date			
REQUEST TYPE:						
<u></u>	nsfer Within Depar			-Item Transfer Betwee		
	fer Within Departm			ional Appropriation of		
ACCOUNT DESCRIPTION	NC	ACCOUNT NUMBER			AMOUNT**	
As it appears in Munis	Fund XXXX	3 3 5 6 Dept Div SubDiv Preg XXX XXX XXXX XXXXXXX		2 6 5 Func Obj Proj XX XXXXXXX XXXXXX	Whole dollars only Ex. \$5,000	
Ex. Employee Training	Ex. 1000-BGT-000-00000-000000-000000-01-520011-			000-01-520011-	Ex. (\$5,000)	
Revenue- CAC Duke Endowme	nt 1000-CSS-2	291-29103-000000-00000)00-0000-05-4450	006-L0006	(15,000.00)	
CAC Duke Endow Prog Sup	CAC Duke Endow Prog Sup 1000-CSS-291-29103-000000-0			000-0000-05-520002-L0006 7,000.00		
CAC Duke Endow F/E <5k	1000-CSS-2	291-29103-000000-00000)00-0000-05-5200)20-L0006	8,000.00	
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JUSTIFICATION FOR RE	TOLIEST.					
Accept and appropriate \$15,000 the South Carolina Network of C	0.00 from The Duke	Endowment (Cohort 3) t/ / Centers. Funds are unr	hrough the Childrestricted.	ren's Advocacy Centers	of North Carolina and	

^{**} 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.