

Gaston County

Gaston County Board of Commissioners www.gastongov.com

DHHS - Public Health Division **Board Action**

File #: 17-074

Commissioner Brown - DHHS (Health Division) - To Accept and Appropriate Additional State Grant Funds Received from the NC Division of Public Health for the Family Planning Program (100% Grant Funds - \$382)

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 \$382 and appropriate \$382 into Drug Line 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 Family Planning Program. The additional funding is provided to assist the Public Health Department to assist with the purchase of contraceptives and medical supplies in the Family Planning Clinic. The funds will be used for the purchase of contraceptives in order to provide obligatory family planning clinical services. These are Non-County funds.

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 i taken by the Board of Commissioners as follows: NO. DATE M1 M2 Brown Fraley Hovis Vote 2017-065 03/28/2017 RW TK AB U **DISTRIBUTION:**

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GAST	TON COUNTY BUDG	SET CHAN	GE REQUEST		
TO: <u>Earl Mathe</u>	ers	_COUNTY N	IANAGER		
FROM:5100	DHHS - Public Health				
Dept. #	Department Name				
- 1111					
Department Directo	r's Signature D	ate			
TYPE OF REQUEST:					
Line Item Transfer Within Department & Fund		Li	ne Item Transfer Between	Funds *	
Project Transfer Within Department & Fund		X Additional Appropriation of Funds *			
Line Item Transfer Between Departments*		* Requires resolution by the Board of Commissioners			
		Resolutio	Resolution # Date		
	ACCOUNT NUM	BER	PROJECT	AMOUNT	
ACCOUNT DESCRIPTION	Fund - Dept - Subdept - Div - A	Acct - Subacct	SUBPROJECT	Whole Dollars Only	
(As it appears in the budget)	xx - xxxx - xxxx - xxxx	- xxx - xxx	xxxxx - xxxx	(See Note Below)	
Health - State Grant	11-5100-5130-320-505			(\$382)	
Drugs	11-5100-5130-238-000			\$382	
	<u> </u>				
JUSTIFICATION FOR REQUEST: The Gaston County Department of Hunds from the NC Division of Public assist the Public Health Department Planning Clinic. The funds will be us clinical services. These are Non-County Description	ic Health for the Family t to assist with the purch sed for the purchase of c	Planning Pronase of contra	ogram. The additional aceptives and medical	al funding is provided to all supplies in the Family	
APPROVAL SIGNATURES:					
THE THE STORY HORLES.					
County Manager/Interim Assistant County N	Manager Date F	inancial Operati	ions Manager/Asst. Financi	ial Operations Mgr. Date	
		Interim Budget Administrator		Date	
Note: Decreases in expenditures & increvenue do not require brackets. Please	reases in revenue account note that transfers between	ts require brace	ckets. Increases in ex	penditures & decreases in	