

**FORSYTH COUNTY
BOARD OF COMMISSIONERS**

**BRIEFING
DRAFT**

MEETING DATE: OCTOBER 4, 2018

AGENDA ITEM NUMBER: 5

**SUBJECT: BUDGET ORDINANCE AMENDMENT TO APPROPRIATE GRANT FUNDS FROM THE NORTH CAROLINA DEPARTMENT OF HEALTH AND HUMAN SERVICES, DIVISION OF PUBLIC HEALTH, WOMEN'S AND CHILDREN'S HEALTH SECTION, NUTRITION SERVICES BRANCH TO THE FORSYTH COUNTY DEPARTMENT OF PUBLIC HEALTH
(FORSYTH COUNTY DEPARTMENT OF PUBLIC HEALTH)**

COUNTY MANAGER'S RECOMMENDATION OR COMMENTS:

SUMMARY OF INFORMATION:

The North Carolina Department of Health and Human Services, Division of Public Health, Women's and Children's Health Section, Nutrition Services Branch has awarded Forsyth County Department of Public Health additional funds in the amount of \$5,541, to acquire equipment, services or staff training for the enhancement of the WIC program. The funds must be spent by September 30, 2018, and reconciled for reimbursement by October 31, 2018.

ATTACHMENTS:

YES

NO

SIGNATURE: _____

COUNTY MANAGER

DATE: _____

**FORSYTH COUNTY, NORTH CAROLINA
AMENDMENT TO
FY 2018-2019 BUDGET ORDINANCE**

FROM: BUDGET & MANAGEMENT

MEETING DATE: October 4, 2018

EXPLANATION:

The North Carolina Department of Health and Human Services, Division of Public Health, Women's and Children's Health Section, Nutrition Services Branch has awarded Forsyth County Department of Public Health additional funds in the amount of \$5,541, to acquire equipment, services or staff training for the enhancement of the WIC program. The funds must be spent by September 30, 2018, and reconciled for reimbursement by October 31, 2018.

BE IT ORDAINED BY THE FORSYTH COUNTY BOARD OF COMMISSIONERS THAT THE 2018-2019 BUDGET ORDINANCE IS HEREBY AMENDED AS FOLLOWS:

INCREASE: SECTION 1. REVENUES.
 INTERGOVERNMENTAL \$5,541

INCREASE: SECTION 2. APPROPRIATIONS.
 GENERAL FUND
 PUBLIC HEALTH \$5,541

NATURE OF TRANSACTION:
 Additional Revenue Available
 Transfer within Accounts of
 Same fund
 Other:

APPROVED BY BOARD OF COUNTY
COMMISSIONERS AND ENTERED ON
MINUTES DATED _____
AGENDA ITEM NUMBER _____
