



REQUEST FOR BOARD ACTION

ITEM NO. 7

DATE OF MEETING: November 9, 2015

REQUESTED BY: Carolyn Moser, Health and Human Services Director, Health Department

SHORT TITLE: Approval of a Budget Amendment to Approve an Increase in Health Department Revenues and Expenditures for Fiscal Year 2015-2016: Communicable Disease \$2,000.

BACKGROUND: Additional funding was provided to assist in the Health Department preparation for the transition to ICD-10 to ensure maximum reimbursement for services rendered in accordance with 10A NCAC 41A.0204 Control Measures-Sexually Transmitted Diseases.

SPECIFIC ACTION REQUESTED: To consider approving a budget amendment for increasing additional programmatic revenues and related expenditures for Pender County Health Department in the Communicable Disease Program by \$2,000 for Fiscal Year 2015-2016.

BUDGET ORDINANCE AMENDMENT TITLE:

Introduced by: Randell Woodruff, County Manager

Date: 2015-11-02

Item #: _____

Fund: 11

Department: Health

Division: Communicable Disease



PENDER COUNTY, NORTH CAROLINA

FY 2015-2016

Budget Amendment # _____

Date Approved: _____

Appropriations

REVENUES		EXPENDITURES	
Increase: <input checked="" type="checkbox"/>	Decrease: <input type="checkbox"/>	Increase: <input checked="" type="checkbox"/>	Decrease: <input type="checkbox"/>
Account # and Title	Amount	Account # and Title	Amount (leave off \$ sign)
11 375025 Communicable Disease ATC	\$2,000.00	11 900052-403300 Supplies & Expenses	\$1,000.00
		11 900052-404600 Medical Expenses	\$1,000.00
Total:		Total:	
	\$2,000.00		\$2,000.00

Reason and Justification for Request:

Additional Funds received in Communicable Disease Program. Listed on the November 9, 2015 BOCC Agenda to accept the additional funding. Item # 7

Dept Mgr. Approval: *[Signature]* Date: 2015-11-02

Finance Officer Approval: _____ Date: _____

Budget Officer Approval: _____ Date: _____

Board Approval (When Applicable) Item # _____

Date of Minutes _____

Email to Finance

Revision 8.5 (1/13/15)

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