

REQUEST FOR BOARD ACTION

**HENDERSON COUNTY
BOARD OF COMMISSIONERS**

MEETING DATE: August 17, 2022

SUBJECT: Budget Amendment – Stryker Power Loads

PRESENTER: Amy Brantley, Assistant County Manager

ATTACHMENTS: Yes
1. Budget Amendment

SUMMARY OF REQUEST:

At the August 1, 2022 Meeting, the Board accept the sole proposal from Stryker Medical for the purchase of eight (8) Stryker Power-LOAD cot fasteners with upgrade kits in the amount of \$184,221.20 using the sole source exception as allowed under N.C.G.S 143-129 (e)(6) and 2 CFR 200.320 (c) (2).

The Board is now requested to approve the attached budget amendment appropriating Fund Balance to transfer funding from the COVID 19 Fund, into the General Fund for the purchase.

BOARD ACTION REQUESTED:

The Board is requested to approve the attached Budget Amendment as presented.

Suggested Motion(s):

I move the Board approve the attached Budget Amendment as presented.

**LINE-ITEM TRANSFER REQUEST
HENDERSON COUNTY**



Department: Emergency Management

Please make the following line-item transfers:

What expense line-item is to be increased?

Account	Line-Item Description	Amount
<u>115433-551000-9043</u>	<u>Capital Outlay – Equipment</u>	<u>\$117,170</u>
<u>395400-598011</u>	<u>Transfer to General Fund</u>	<u>\$117,170</u>
_____	_____	_____

What expense line-item is to be decreased? Or what additional revenue is now expected?

Account	Line-Item Description	Amount
<u>114980-403900-9043</u>	<u>Transfer from COVID 19 Fund</u>	<u>\$117,170</u>
<u>394500-401000</u>	<u>Fund Balance Appropriated</u>	<u>\$117,170</u>
_____	_____	_____

Justification *Please provide a brief justification for this line-item transfer request.*

To budget for the Board approved Stryker Power Load Systems funded by ARPA Funds (Standard Allowance) approved by the Board on August 1, 2022. Budget Amendment approved by the Board August 17, 2022.

Authorized by Department Head

Date

Authorized by Budget Office

Date

Authorized by County Manager

Date

<i>For Budget Use Only</i>	
Batch #	_____
BA #	_____
Batch Date	_____