

REQUEST FOR BOARD ACTION

HENDERSON COUNTY BOARD OF COMMISSIONERS

MEETING DATE: October 15, 2025

SUBJECT: Budget Amendment – Transfer Insurance Proceeds for HCSO
Radios

PRESENTER: Randall L. Cox, Finance Director

ATTACHMENTS:

1. Budget Amendment
2. Equipment Replacement Summary

SUMMARY OF REQUEST:

The Board is requested to approve the transfer of insurance proceeds from the Hurricane Helene fund to the General Fund for the repair and replacement of County equipment damaged by Hurricane Helene; to include purchase, installation, and any related service plans needed to restore operations.

BOARD ACTION REQUESTED:

Staff recommend the Board authorize the transfer of insurance proceeds from the Hurricane Helene Fund to the General Fund.

SUGGESTED MOTION:

I move that the Board approve the budget amendment as presented, authorizing the transfer of insurance proceeds from the Hurricane Helene Fund to the General Fund.

HENDERSON COUNTY, NC
 FOUNDED 1796

Department: Finance

Please make the following line-item transfers:

What expense line-item is to be increased?

Account	Line-Item Description	Amount
525500-598011-9096	Transfer to General Fund	\$28,412
115422-552000-9096	IT - Capital Outlay-Technology	\$20,662
115422-526020-9096	IT - Non-Expendable Dept Supplies	\$2,279
115431-526000-9096	HCSO - Dept Supplies & Materials	\$428
115431-526020-9096	HCSO - Dept Supplies-Nonexpendable	\$5,043
		\$56,824

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

Account	Line-Item Description	Amount
524500-492007-9096	Insurance Proceeds	\$28,412
114980-405200-9096	Transfer from Helene Fund	\$28,412
		\$56,824

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

To appropriate insurance proceeds for the repair / replacement of Henderson County Sheriff's Office equipment damaged during Hurricane Helene.. BOC approved 10.15.25.

_____ 10/15/2025
 Authorized by Department Head Date

Authorized by Budget Office _____ Date _____

Authorized by County Manager _____ Date _____

For Budget Use Only

Batch #

BA #

Batch Date

HCSO Equipment to be Replaced / Repaired due to Hurricane Helene Damage

		Insurance Claim Amount						
Equipment to be Repaired / Replaced	Qty.	Insurance Check #147614671	Insurance Check #147614638	Total	Equipment Quote	Total	Difference in Insurance & Actual Cost	
Items to be Replaced by IT								
In-Car Camera	4	\$ 4,615.10		\$ 18,460.40	\$ 5,981.79	\$ 23,927.16	\$ (5,466.76)	
Body-Worn Camera	2		\$ 2,240.00	\$ 4,480.00	\$ 1,139.40	\$ 2,278.80	\$ 2,201.20	
Items to be Replaced by HCSO								
Mobile Car Radios	4		\$ 921.24	\$ 3,684.96	\$ 865.90	\$ 3,463.60	\$ 221.36	
Portable Radios	2		\$ 929.60	\$ 1,859.20	\$ 1,003.47	\$ 2,006.94	\$ (147.74)	
				\$ 28,484.56		\$ 31,676.50	\$ (3,191.94)	

Check Amounts	\$ 44,725.69	\$ 15,853.22
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Total	\$ 60,578.91
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Balance Remaining	\$ 28,902.41
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