RESOLUTION NO. 2002 - 232

A RESOLUTION OF THE BOARD OF COUNTY COMMISSIONERS OF ST. JOHNS COUNTY, FLORIDA, RECOGNIZING AND APPROPRIATING UNANTICIPATED REVENUE FROM DONATIONS RECEIVED FROM FAMILY AND FRIENDS OF A PATIENT CARED FOR BY FIRE-RESCUE PERSONNEL TO ITS FY 2003 EMS BUDGET.

WHEREAS, on August 31, 2002, St. Johns County Fire-Rescue personnel responded to an emergency call at the residence of Mr. Denis Milan and provided treatment and transport to the hospital, and

WHEREAS, following Mr. Milan’s death, his family asked that in lieu of flowers, donations be made to St. Johns County Fire-Rescue to purchase equipment, and

WHEREAS, as a result of those donations, the Fire-Rescue department was presented with checks totaling $1,115.00.

NOW BE IT RESOLVED BY THE BOARD OF COUNTY COMMISSIONERS OF ST. JOHNS COUNTY, FLORIDA, THAT:

1. The above-recitals are hereby adopted as findings of fact.
2. The EMS Department expenditure budget shall be adjusted to account for the receipt of unanticipated revenue in the amount of $1,115.00.

PASSED AND ADOPTED by the Board of County Commissioners of St. Johns County, State of Florida, this 5th of November, 2002.

BOARD OF COUNTY COMMISSIONERS OF ST. JOHNS COUNTY, FLORIDA

By: James Bryant, Chair

ATTEST: Cheryl Strickland, Clerk

By: Patricia Hopkins

Deputy Clerk

RENDITION DATE 11-12-02
**ST. JOHNS COUNTY**
**BOARD OF COUNTY COMMISSIONERS**
**BUDGET TRANSFER FORM**
November 5, 2002
(Board Meeting Date)

<table>
<thead>
<tr>
<th>Date:</th>
<th>October 1, 2002</th>
<th>Dept:</th>
<th>EMS</th>
<th>Division: 0048</th>
<th>Fund: 0001</th>
</tr>
</thead>
</table>

### Increase:

<table>
<thead>
<tr>
<th>Account No.</th>
<th>Title</th>
<th>Amount</th>
<th>Account No.</th>
<th>Title</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>0001-36603</td>
<td>Donations</td>
<td>$1115.00</td>
<td>0048-55200</td>
<td>Operating Supplies</td>
<td>$1115.00</td>
</tr>
</tbody>
</table>

**TOTAL:** $1115.00

### Appropriation:

<table>
<thead>
<tr>
<th>Account No.</th>
<th>Title</th>
<th>Amount</th>
<th>Account No.</th>
<th>Title</th>
<th>Amount</th>
</tr>
</thead>
</table>

**TOTAL:** $1115.00

### Justification of Request:

Recognition of unanticipated revenue from donations.

---

**Department Head**

This request has been checked and is correct in every aspect including an adequate source of funds to complete the transfer:

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>X</th>
<th>No</th>
</tr>
</thead>
</table>

---

**Budget Officer**

**Recommendation of the County Administrator**

<table>
<thead>
<tr>
<th>Approved</th>
<th>Disapproved</th>
</tr>
</thead>
</table>

**Remarks:**

Form 200-revised 11/97