

RESOLUTION 2010 - 141

A RESOLUTION OF THE BOARD OF COUNTY COMMISSIONERS OF ST. JOHNS COUNTY, FLORIDA, AMENDING THE FISCAL YEAR 2010 SPECIAL REVENUE FUNDS BUDGET TO RECEIVE UNANTICIPATED REVENUE AND AUTHORIZE ITS EXPENDITURE BY THE ST. JOHNS COUNTY HEALTH AND HUMAN SERVICES DEPARTMENT/MENTAL HEALTH SERVICES.

WHEREAS, the County operating budget is annually prepared prior to knowing the actual line of credit for psychiatric medications amount to be awarded by the State Hospital Indigent Drug Program (IDP) which may be received by the Special Revenue Fund; and

WHEREAS, St. Johns County, Florida, when preparing the budget for Fiscal Year 2010, did not anticipate receiving an increase in the line of credit from the State Hospital IDP above and beyond that projected by the Special Revenue Fund; and

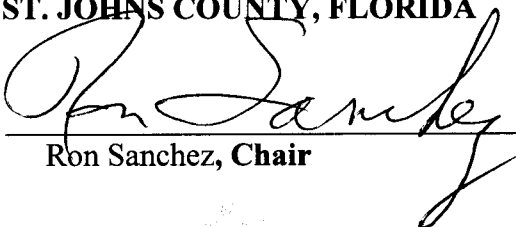
WHEREAS, the State Hospital IDP has awarded an increased line of credit to St. Johns County for Fiscal Year 2010 that exceeds the budgeted amount by \$1,764.34.

NOW THEREFORE, 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 Special Revenue Fund revenue and expenditure budgets shall be adjusted to account for an unanticipated increase in the line of credit for psychiatric medications from the State Hospital in the amount of \$1,764.34 for Fiscal Year 2010.
3. To the extent that there are typographical and/or administrative errors and/or omissions that do not change the tone, tenor, or context of this Resolution, then this Resolution may be revised without subsequent approval of the Board of County Commissioners.

PASSED AND ADOPTED by the Board of County Commissioners of St. Johns County, State of Florida, this 20th day of July 2010.

**BOARD OF COUNTY COMMISSIONERS
OF ST. JOHNS COUNTY, FLORIDA**

By: 
Ron Sanchez, Chair

ATTEST: Cheryl Strickland, Clerk

By: 
Deputy Clerk

RENDITION DATE 7/21/10





**ST. JOHNS COUNTY
BOARD OF COUNTY COMMISSIONERS
BUDGET TRANSFER FORM**

(Board Meeting Date)

Date:		Dept Name:	Mental Health	Dept #:	1101	Fund #:	1109
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Increase:			Appropriate To:		
Account No.	Title	Amount	Account No.	Title	Amount
33471	State-Drug Allocation LOC	\$1,794	55707	Client Drugs LOC	\$1,764
TOTAL:		\$1,794	TOTAL:		\$1,764

Justification of Request:

Per BOCC agenda 7/20/10, increased revenue from FL State Hospital for Client Medications

Authorized Signature

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

Yes

No

Budget Officer

Recommendation of the County Administrator

Approved

Disapproved

Remarks: