



AGENDA

ANDERSON COUNTY FINANCE COMMITTEE MEETING

Friday October 29, 2021 8:15 a.m.

101 South Main Street, Anderson SC

Second Floor, Administrator's Conference Room

Chairman Brett Sanders, Presiding

Tommy Dunn
Chairman
Council District 5

Brett Sanders
Vice Chairman
Council District 4

John B. Wright, Jr.
Council District 1

Glenn Davis
Council District 2

Ray Graham
Council District 3

Jimmy Davis
Council District 6

M. Cindy Wilson
Council District 7

Lacey Croegaert
Clerk to Council

Rusty Burns
County Administrator

- | | |
|---|-------------------------|
| 1. Call to Order | Chairman Sanders |
| 2. Prayer and Pledge of Allegiance | Honorable Brett Sanders |
| 3. Bid #22-017 Front Entry Construction Project | Mr. Robert Carroll |
| 4. Donation to City of Belton | Mr. Rusty Burns |
| 5. Sale of Real Property-126 North McDuffie Street | Mr. Rusty Burns |
| 6. Transfers | Ms. Rita Davis |
| 7. Executive Session
Discussion of negotiations incident to
proposed purchase of properties | Mr. Rusty Burns |
| 8. Action following Executive Session | Mr. Brett Sanders |
| 9. Citizens Comments | |
| 10. Adjourn | |

ADMINISTRATION DIVISION

Rusty Burns | County Administrator

O: 864-260-4031 | F: 864-260-4548 | rburns@andersoncountysc.org

Historic Courthouse | 101 South Main Street, Anderson SC 29624

PO Box 8002, Anderson, South Carolina 29622-8002 | www.andersoncountysc.org

Anderson County Purchasing Department Bid Tabulation

BID #22-017 FRONT ENTRY CONSTRUCTION PROJECT

	Bidder's Name	Bid Amount
1	JM COPE	\$908,664.00
2	GLENN CONSTRUCTORS	\$919,500.00
3	SATCHEL CONSTRUCTION	\$926,554.00
4	LAZER	\$983,900.00
5	J. DAVIS CONTRUCTION	\$996,214.00
6	JONSCOT CONTRACTORS	\$999,000.00
7	MAR	NO RESPONSE
8	MARSH BELL	NO RESPONSE
9	GLENN MECHANICAL	NO RESPONSE
10	HARRIS FLOORING	NO RESPONSE
11	AIR ONE HVAC	NO RESPONSE
12	BONITZ	NO RESPONSE
13	N E CONSTRUCTION	NO RESPONSE
14	SUMMIT	NO RESPONSE

Bidder Name		Bid/Alt Bid
15	LENTZ	NO RESPONSE
16	W P LAW	NO RESPONSE
17	HOGAN	NO RESPONSE
18	MAVIN	NO RESPONSE
19	RANDOLPH BUILDERS	NO RESPONSE
20	MATRIX	NO RESPONSE
21	BONE DRY ROOFING	NO RESPONSE
22		
23		
24		
25		
26		
27		
28		
AWARD TO:		J.M. LOPE



SOLICITATION OFFER AND AWARD FORM

ANDERSON COUNTY PURCHASING, ANDERSON, SOUTH CAROLINA 29624		
REQUEST FOR SOLICITATIONS, OFFER AND AWARD		
*****Solicitation Information*****		
1. SOLICITATION: # 22-017 2. ISSUE DATE: <i>September 10, 2021</i> 3. FOR INFORMATION CONTACT: <i>allpurchasing@andersoncountysc.org</i> <i>RSC</i> 5. SUBMIT BID TO: Anderson County Purchasing Department 101 South Main Street, Room 115 Anderson, S.C. 29624 Attn: Bid # 22-017	Brief Description: Front Entry Construction Project of the 1428 Building located at 1428 Pearman Dairy Road in Anderson, S.C. (SEE SCOPE OF WORK & SPECIFICATIONS) A mandatory pre-bid meeting will be held on Tuesday, September 28 th at 10:00 A.M. Interested parties should meet at the front entrance of the 1428 Building located at 1428 Pearman Dairy Road, Anderson, S.C.	
6. Submission Deadline: <i>Date: Thursday, October 14, 2021</i> <i>Time: 11:00 A.M.</i>		
7. Submit Sealed Bid		
8. Firm Offer Period: Bids submitted shall remain firm for a period of Sixty calendar days from date specified in block 6.		
*****Offer (To be completed by Bidder)*****		
9. BUSINESS CLASSIFICATION (Check Appropriate Box)	<input type="checkbox"/> Woman Business Enterprise <input type="checkbox"/> Minority Business Enterprise <input type="checkbox"/> Disadvantaged Business Enterprise	
10. Additional Information: In compliance with above, the undersigned agrees, if this proposal is accepted within the period specified in Block 8 above, to furnish any or all other further information requested by Anderson County.		
11. Bidder's name and address (Type or print): <div style="font-size: 1.2em; margin-top: 10px;"> <i>J.m. Cope, Inc.</i> <i>Po Box 4047</i> <i>Rock Hill, SC 29732</i> </div> <div style="margin-top: 20px;"> e-mail: <i>Acope@jmcopco.com</i> Telephone # <i>864-351-2227</i> Fax # Federal Identification #: <i>26-4795038</i> </div>	12. Name & Title of Person Authorized to sign the Bid. (Type or Print): <div style="font-size: 1.2em; margin-top: 10px;"> <i>Andrew M. Cope, CEO</i> </div> 13. Bidder's Signature & Date <div style="font-size: 1.5em; margin-top: 10px;"> <i>10/14/21</i> </div>	
*****AWARD (To be completed by Anderson County)*****		
14. Total amount of award:	15. Successful Bidder:	
16. Contracting Officer or Authorized Representative: <i>Robert E. Carroll</i>	17. Signature:	18. Award date:

SECTION III

Bid Form

Name of Party submitting the Bid: J. M. Cope, Inc.

To: Purchasing Manager for Anderson County

1. Pursuant to the Notice Calling for Bids and the other Bid documents contained in the Bid package, the undersigned party submitting the Bid, having conducted a thorough inspection and evaluation of the Specifications contained therein, hereby submit the following pricing set forth herein:

Bid: Front Entry Project at 1428 Building (Former TTi)

Bid No.: 22-017

ITEM	Qty.	UNIT	UNIT PRICE	TOTAL
Front Entry Project at 1428	1	L/S	\$ 908,664.00	\$ 908,664.60

*** See Scope of Work**

Each individual bid item shall be determined from visiting the work site, reviewing the plans and specifications and all other portions of the bid documents, and shall include all items necessary to complete the work, including the assumption of all obligations, duties, and responsibilities necessary to the successful completion of all obligations of the Contractor's Agreement, and the furnishing of all materials and equipment required to be incorporated in and form a permanent part of the work, the furnishing of tools, equipment, permanent and temporary construction signs, supplies, transportation, facilities, labor, superintendence, and services required to perform and complete the work, and all bonds, insurance and submittals, pursuant to the requirements of the Bid Package, including, but not limited to, the Contractor's Agreement and all Bid Documents, whether or not expressly listed or designated. It is understood that each item is estimated and quantities may change and that the final bill will reflect actual quantities in place per the unit priced of that bid item.

The City of Belton has requested donations of any Police/Sheriff units and the Parks/Rec division is also requesting donation of any available work body trucks. Currently we have 2 units that could be donated.

I am including pictures of both units. Please keep in mind we will (if approved to donate) remove the decals on the Crown Vic and will donate the police equipment along with the vehicle. The truck light bar will also remain. Both units do have some body issues with paint and small dents. The truck will need 2 batteries and will need a tire sensor.

Crown Vic Info: Current miles- 244,479 2006 Vin# 2FAFP71W46X156320 Estimated Value \$1500

F250 Work body Info: Diesel Current Miles- 195,437 2008 Vin# 1FDSW20R68EE17487 Est Value \$7500



5

Anderson Appraisals, Inc.
2810 E. North Avenue
Anderson, SC 29625
864-225-0222 (Fax) 864-231-7767

Summary Appraisal

Limited Intended Use/User Report

October 27, 2021

Anderson County
P O Box 8002
Anderson, SC 29622

RE: None
126 N McDuffie St
Anderson, SC 29621
File No. 052/21
Case No.

Dear Robert:

In accordance with your request, I have personally inspected and prepared an appraisal report of the real property located at:

126 N McDuffie St, Anderson, SC 29621

The purpose of this appraisal is to estimate the market value of the property described in the body of this appraisal report.

Enclosed, please find the appraisal report which describes certain data gathered during our investigation of the property. The methods of approach and reasoning in the valuation of the various physical and economic factors of the subject property are contained in this report.

An inspection of the property and a study of pertinent factors, including valuation trends and an analysis of neighborhood data, led the appraiser to the conclusion that the market value, as of October 27, 2021 is:

\$ 340,000

The opinion of value expressed in this report is contingent upon the limiting conditions attached to this report.

It has been a pleasure to assist you. If I may be of further service to you in the future, please let me know.

Respectfully submitted,

Signature: 

SUMMARY APPRAISAL

LIMITED INTENDED USE/USER REPORT

Ken Walker
SC - CG 531

SUMMARY OF SALIENT FEATURES

File No. 052/21

Case No.

SUBJECT INFORMATION	
Subject Address	126 N McDuffie St
Legal Description	Deed Book 20N @ 00548 (Part of)
City	Anderson
County	Anderson
State	SC
Zip Code	29621
Census Tract	
Map Reference	123-30-04-001 (Part of)
SALES PRICE	
Sale Price	\$ N/A
Date of Sale	
CLIENT	
Borrower	None
Lender/Client	Anderson County
DESCRIPTION OF IMPROVEMENT	
Size (Square Feet)	3,820
Price per Square Foot	\$ 89
Location	Urban
Age	60+ (est.)
Condition	Good
Total Rooms	
Bedrooms	
Baths	3 Restrooms
APPRAISER	
Appraiser	Ken Walker
Date of Appraised Value	October 27, 2021
VALUE	
Final Opinion of Value \$	340,000
<p align="center">SUMMARY REPORT FORMAT LIMITED INTENDED USE/USER REPORT</p>	

DEPARTMENTAL TRANSFERS

For Budget Year 2020 - 2021

Mark
APPROVEDFinance Meeting of:
Council Meeting:DEPARTMENT
NAME10/29/2021
11/2/2021FROM: ACCOUNT NAME
ACCOUNT NUMBERTO: ACCOUNT NAME
ACCOUNT NUMBER

AMOUNT

REASON

1	Between Depts. Facilities to Treasurer	Facilities - Electricity & Gas 001-5021-000-212	Treasurer - Bank Fees 001-5042-000-203	252,000.00	In an effort to dissuade taxpayers from entering the courthouse annex, the Treasurer absorbed card fees. This was covered by American Rescue Plan funds.
2	Between Depts. Facilities to Treasurer	Facilities - Repairs to Build 001-5021-000-250.	Treasurer - Bank Fees 001-5042-000-203	245,000.00	Same as #1 above
3	Between Depts. Information Tech to Treasurer	IT - Repairs to Equipment 001-5092-000-251	Treasurer - Bank Fees 001-5042-000-203	9,800.00	Same as #1 above
4	Between Depts. Communications to Treasurer	Communications - Salary 001-5213-000-101	Treasurer - Bank Fees 001-5042-000-203	198,000.00	Same as #1 above
5	Registration and Elections (Poll Workers)	Training for Employees 001-5082-000-277	Retirement - SC 001-5082-000-120	325.00	Finance underestimated the number of employees that would choose this benefit; plus addition election held
6	Registration and Elections (Poll Workers)	Travel 001-5082-000-279	Retirement - SC 001-5082-000-120	400.00	Finance underestimated the number of employees that would choose this benefit; plus addition election held
7	Purchasing	Advertising 001-5091-000-201	Telephone (House Account) 001-5091-001-275	11,675.00	Addition of data lines, increase/upgrade in Internet bandwidth, added D Dos Security, Long Distance charges and VOIP
8	Building Codes	Retirement - SC 001-5411-000-120	Credit Card Charges 001-5411-000-206	3,500.00	Costs associated with accepting credit cards to reduce contact with individuals during COVID-19
9	Building Codes	Social Security 001-5411-000-130	Credit Card Charges 001-5411-000-206	3,000.00	Costs associated with accepting credit cards to reduce contact with individuals during COVID-19
10	Sports Complex	Water and Sewer 001-5956-000-286	Repairs to Building 001-5956-000-250	13,210.00	Troubleshooting pole lights at the soccer fields. Rental of equipment needed for repair as well as parts
11	Airport	AV Gas 142-5775-000-220	Salaries - Full time 142-5775-000-101	8,500.00	Change in Salaries with new manager
12	Airport	AV Gas 142-5775-000-220	Engineering 142-5775-000-311	3,000.00	Payment to Michael Baker for services rendered pertaining to Airport Grants
13	WWTP	Interest 410-5612-641-501	Revenue Remittance 410-5612-641-255	448,810.00	Primarily due to ECU's increase in per thousand gallon from \$3.24 \$3.53 per gallon.
14	Between Depts. Facilities to Attorney	Facilities - Service Contracts 001-5021-000-375	Attorney - Legal 001-5015-000-315	37,000.00	Professional legal fees
15	Between Depts. Parks to Museum	Parks - Health Insurance 001-5065-000-160	Museum - Part time 001-5064-000-102	6,310.00	Events & Program were able to continue, due to people having to stay home due to pandemic and abundance of artifacts came that needed to be cleaned and chronicled
16	Between Depts. Communications to EPD	Communications - Health Ins 001-5213-000-160	Emergency Prepared - Rent 001-5212-000-247	5,000.00	Back Up Generator - 80% reimbursable
17	Between Depts. Communications to EPD	Communications - Health Ins 001-5213-000-160	Emergency Prepared - Medical 001-5212-000-346	15,000.00	Sample testing for COVID and rapid testing for personnel to return to Academy,
18	Personnel	Training for Employee 001-5014-000-277	Health Insurance 001-5014-000-160	2,965.00	Transfer needed as a result of clearing out the Health Insurance it Proportionately distributed based upon annual amount charged to each department based upon number of employees

DEPARTMENTAL TRANSFERS

For Budget Year 2020 - 2021

Mark APPROVED	DEPARTMENT NAME	FROM: ACCOUNT NAME ACCOUNT NUMBER	TO: ACCOUNT NAME ACCOUNT NUMBER	AMOUNT	REASON
19	Auditor	Lodging 001-5041-000-277	Health Insurance 001-5041-000-160	2,550.00	Same as Number 18 above
20	Treasurer	Supplies - Office 001-5042-000-269	Health Insurance 001-5042-000-160	1,000.00	Same as Number 18 above
21	Treasurer	Service Contracts 001-5042-000-375	Health Insurance 001-5042-000-160	800.00	Same as Number 18 above
22	Finance	Management Consulting 001-5043-000-339	Health Insurance 001-5043-000-160	8,950.00	Same as Number 18 above
23	Register of Deeds	Professional Services 001-5059-000-304	Health Insurance 001-5059-000-160	3,675.00	Same as Number 18 above
24	Forensics	Service Contracts 001-5142-000-375	Health Insurance 001-5142-000-160	2,250.00	Same as Number 18 above
25	Airport	Electricity and Gas 142-5775-000-212	Health Insurance 142-5775-000-160	4,215.00	Same as Number 18 above
26	Between Depts. Parks to Museum	Parks - Training for Employees 001-5065-000-277	Museum - Health Insurance 001-5064-000-160	3,000.00	Same as Number 18 above
27	Between Depts. Parks to Museum	Parks - Photocopy 001-5065-000-347	Museum - Health Insurance 001-5064-000-160	950.00	Same as Number 18 above

DATE

Renee Watts, Clerk to Council

DIVISION: Between Division

DEPARTMENT: Between Departments

Explain, in COMPLETE DETAIL, the reason for the transfer.

In an effort to dissuade taxpayers from entering the courthouse annex, the Treasurer absorbed the credit card fees through June 30, 2021. The fee is 1.75% of total charge +\$1. American Rescue Plan funds (lost revenue) covered this for the fiscal year.

DEPT. HEAD: _____ DIVIS HEAD: _____ FINANCE: _____ ADMINISTRATOR: _____	DATE: _____ DATE: _____ DATE: _____ DATE: _____
--	--

Journal Entry # _____ **DATE:** _____

BUDGET TRANSFER

DIVISION: Registration and Elections

DEPARTMENT: Poll Workers

FROM:		TO:	AMOUNT:
TITLE	Training for Employees	TITLE	Retirement - SC
ACCT.#	001-5082-000-277	ACCT#	001-5082-000-120
			325.00
TITLE	Travel	TITLE	Retirement - SC
ACCT.#	001-5082-000-279	ACCT#	001-5082-000-120
			400.00
TITLE		TITLE	
ACCT#		ACCT#	
TITLE		TITLE	
ACCT.#		ACCT#	
TITLE		TITLE	
ACCT.#		ACCT#	
Total			725.00

Explain, in COMPLETE DETAIL, the reason for the transfer.

REASON:

Underestimated retirement expense for poll workers. Choosing to have retirement benefits is optional and finance underestimated these that would elect to be covered; plus there was additional elections held. (i.e.: fire millage).

Is this transfer within your department? (Circle One) Yes No

Is this transfer within your division? (Circle One) Yes No

DEPT. HEAD:	_____	DATE:	_____
DIVIS HEAD:	_____	DATE:	_____
FINANCE:	_____	DATE:	_____
ADMINISTRATOR:	_____	DATE:	_____
Journal Entry #	_____	DATE:	_____

BUDGET TRANSFER

DIVISION: Central Administrative Division

DEPARTMENT: Purchasing

FROM:		TO:	AMOUNT:
TITLE	<u>Advertising</u>	TITLE	<u>Telephone (House Account)</u>
ACCT.#	<u>001-5091-000-201</u>	ACCT#	<u>001-5091-001-275</u> <u>11,675.00</u>
TITLE	<u></u>	TITLE	<u></u>
ACCT.#	<u></u>	ACCT#	<u></u>
TITLE	<u></u>	TITLE	<u></u>
ACCT#	<u></u>	ACCT#	<u></u>
TITLE	<u></u>	TITLE	<u></u>
ACCT.#	<u></u>	ACCT#	<u></u>
TITLE	<u></u>	TITLE	<u></u>
ACCT.#	<u></u>	ACCT#	<u></u>
		Total	<u>11,675.00</u>

Explain, in COMPLETE DETAIL, the reason for the transfer.

REASON:

Addition of data lines, increase/upgrade in Internet bandwidth, added D Dos Security, Long Distance
charges, and VOIP

Is this transfer within your department? (Circle One) Yes No

Is this transfer within your division? (Circle One) Yes No

DEPT. HEAD:

DIVIS HEAD:

FINANCE:

ADMINISTRATOR:

DATE:

DATE:

DATE:

DATE:

Journal Entry #

DATE:

BUDGET TRANSFER

DIVISION: Public Works Administration

DEPARTMENT: Building Codes

FROM:		TO:	AMOUNT:
TITLE	<u>Retirement - SC</u>	TITLE	<u>Credit Card Charges</u>
ACCT.#	<u>001-5411-000-120</u>	ACCT#	<u>001-5411-000-206</u> <u>3,500.00</u>
TITLE	<u>Social Security</u>	TITLE	<u>Credit Card Charges</u>
ACCT.#	<u>001-5411-000-130</u>	ACCT#	<u>001-5411-000-206</u> <u>3,000.00</u>
TITLE	<u></u>	TITLE	<u></u>
ACCT#	<u></u>	ACCT#	<u></u>
TITLE	<u></u>	TITLE	<u></u>
ACCT.#	<u></u>	ACCT#	<u></u>
TITLE	<u></u>	TITLE	<u></u>
ACCT.#	<u></u>	ACCT#	<u></u>
		Total	<u>6,500.00</u>

Explain, in COMPLETE DETAIL, the reason for the transfer.

REASON:

Costs associated with accepting credit card payments for permits, plan reviews and reinspection fees.
Staff can process payments via phone precluding developer/home owner coming into Annex which
assisted in quarantining during COVID-19

Is this transfer within your department? (Circle One) Yes No

Is this transfer within your division? (Circle One) Yes No

DEPT. HEAD:	<u></u>	DATE:	<u></u>
DIVIS HEAD:	<u></u>	DATE:	<u></u>
FINANCE:	<u></u>	DATE:	<u></u>
ADMINISTRATOR:	<u></u>	DATE:	<u></u>
Journal Entry #	<u></u>	DATE:	<u></u>

BUDGET TRANSFER

DIVISION: PRT Division

DEPARTMENT: Sports Complex

FROM:		TO:	AMOUNT:
TITLE	Water and Sewer	TITLE	Repairs to Building
ACCT.#	001-5956-000-286	ACCT#	001-5956-000-250
			13,210.00
TITLE		TITLE	
ACCT.#		ACCT#	
TITLE		TITLE	
ACCT#		ACCT#	
TITLE		TITLE	
ACCT.#		ACCT#	
TITLE		TITLE	
ACCT.#		ACCT#	
Total			13,210.00

Explain, in COMPLETE DETAIL, the reason for the transfer.

REASON:

Troubleshooting pole lights at the soccer fields. Rental of 100' lift Crane and Bucket truck for the repair and 1500 watt bulbs and ballast kits with lamps

Is this transfer within your department? (Circle One) Yes No

Is this transfer within your division? (Circle One) Yes No

DEPT. HEAD: _____
DIVIS HEAD: _____
FINANCE: _____
ADMINISTRATOR: _____

DATE: _____
DATE: _____
DATE: _____
DATE: _____

Journal Entry # _____

DATE: _____

BUDGET TRANSFER

DIVISION: Administration

DEPARTMENT: Airport

FROM:		TO:		AMOUNT:
TITLE	AV Gas	TITLE	Salaries - Full time	
ACCT.#	142-5775-000-220	ACCT#	142-5775-000-101	8,500.00
TITLE	AV Gas	TITLE	Engineering	
ACCT.#	142-5775-000-220	ACCT#	142-5775-000-311	3,000.00
TITLE		TITLE		
ACCT#		ACCT#		
TITLE		TITLE		
ACCT.#		ACCT#		
TITLE		TITLE		
ACCT.#		ACCT#		
Total				11,500.00

Explain, in COMPLETE DETAIL, the reason for the transfer.

REASON:

101 - Change in Salaries with new manager

311 - Payment to Michael Baker for services rendered pertaining to Airport Grants

Is this transfer within your department? (Circle One) Yes No

Is this transfer within your division? (Circle One) Yes No

DEPT. HEAD:	_____	DATE:	_____
DIVIS HEAD:	_____	DATE:	_____
FINANCE:	_____	DATE:	_____
ADMINISTRATOR:	_____	DATE:	_____
Journal Entry #	_____	DATE:	_____

BUDGET TRANSFER

DIVISION: Public Works Division

DEPARTMENT: WWTP

FROM:		TO:		AMOUNT:
TITLE	Interest	TITLE	Revenue Remittance	
ACCT.#	410-5612-641-501	ACCT#	410-5612-641-255	448,810.00
TITLE		TITLE		
ACCT.#		ACCT#		
TITLE		TITLE		
ACCT#		ACCT#		
TITLE		TITLE		
ACCT.#		ACCT#		
TITLE		TITLE		
ACCT.#		ACCT#		
Total				448,810.00

Explain, in COMPLETE DETAIL, the reason for the transfer.

REASON:

Additional amount primarily due to ECU's increase in per thousand gallon from \$3.24 to \$3.53 per
gallon. Approximately, 9.2m more gallons were processed through all wastewater treatment plants
in FY 21 when compared to FY 20

Is this transfer within your department? (Circle One) Yes No

Is this transfer within your division? (Circle One) Yes No

DEPT. HEAD:		DATE:	
DIVIS HEAD:		DATE:	
FINANCE:		DATE:	
ADMINISTRATOR:		DATE:	
Journal Entry #		DATE:	

BUDGET TRANSFER

DIVISION: _____

DEPARTMENT: _____

Between Departments

FROM:

TO:

AMOUNT:

TITLE Facilities - Ser Contracts
ACCT.# 001-5021-000-375

TITLE Attorney Legal
ACCT# 001-5015-000-315 37,000.00

TITLE Parks - Health Insurance
ACCT.# 001-5065-000-160

TITLE Museum - Part time
ACCT# 001-5064-000-102 6,310.00

TITLE Communications - Health Ins
ACCT# 001-5213-000-160

TITLE Emergency Prepared - Rent
ACCT# 001-5212-000-247 5,000.00

TITLE Communications - Health Ins
ACCT.# 001-5213-000-160

TITLE Emergency Prepared - Medical
ACCT# 001-5212-000-346 15,000.00

TITLE _____
ACCT.# _____

TITLE _____
ACCT# _____

Total

63,310.00

Explain, in COMPLETE DETAIL, the reason for the transfer.

REASON:

315 - Professional Legal Fees

102 - Events & Program were able to continue with social distancing established, there was an abundance artifacts that came in during the pandemic that needed to be cleaned and chronicled

247 - FEMA Expenditures - Backup Generator - Costs is 80% reimbursable from State

346 - Sample testing for COVID and rapid testing for personnel to return to Sheriff's Academy,

Is this transfer within your department?

(Circle One)

Yes

No

Is this transfer within your division?

(Circle One)

Yes

No

DEPT. HEAD:

DATE:

DIVIS HEAD:

DATE:

FINANCE:

DATE:

ADMINISTRATOR:

DATE:

Journal Entry #

DATE:

BUDGET TRANSFER

DIVISION: _____

DEPARTMENT: _____

See Department with each transfer

FROM:		TO:	AMOUNT:
HUMAN RESOURCES			
TITLE	Training for Employee	TITLE	Health Insurance
ACCT.#	001-5014-000-277	ACCT#	001-5014-000-160
			2,965.00
AUDITOR			
TITLE	Lodging	TITLE	Health Insurance
ACCT.#	001-5041-000-277	ACCT#	001-5041-000-160
			2,550.00
TREASURER			
TITLE	Supplies - Office	TITLE	Health Insurance
ACCT#	001-5042-000-269	ACCT#	001-5042-000-160
			1,000.00
TITLE	Service Contracts	TITLE	Health Insurance
ACCT.#	001-5042-000-375	ACCT#	001-5042-000-160
			800.00
FINANCE			
TITLE	Management Consulting	TITLE	Health Insurance
ACCT.#	001-5043-000-339	ACCT#	001-5043-000-160
			8,950.00
		Total	16,265.00

Explain, in COMPLETE DETAIL, the reason for the transfer.

REASON:

Transfer needed as a result of clearing out the Health Insurance Internal Service Fund; the net of claims, prescriptions and administrative costs to include EBMS, 6th Degrees and stop loss insurance. This was proportionately distributed based upon annual amount charged to each department based upon number of employees each month.

Is this transfer within your department? (Circle One) Yes No

Is this transfer within your division? (Circle One) Yes No

DEPT. HEAD: _____

DATE: _____

DIVIS HEAD: _____

DATE: _____

FINANCE: _____

DATE: _____

ADMINISTRATOR: _____

DATE: _____

Journal Entry # _____

DATE: _____

BUDGET TRANSFER

DIVISION: _____

DEPARTMENT: _____

See Department with each transfer

FROM:		TO:	AMOUNT:
REGISTER OF DEEDS			
TITLE <u>Professional Services</u>		TITLE <u>Health Insurance</u>	
ACCT.# <u>001-5059-000-304</u>		ACCT# <u>001-5059-000-160</u>	3,675.00
FORENSICS			
TITLE <u>Service Contracts</u>		TITLE <u>Health Insurance</u>	
ACCT.# <u>001-5142-000-375</u>		ACCT# <u>001-5142-000-160</u>	2,250.00
AIRPORT			
TITLE <u>Electricity and Gas</u>		TITLE <u>Health Insurance</u>	
ACCT.# <u>142-5775-000-212</u>		ACCT# <u>142-5775-000-160</u>	4,215.00
BETWEEN DEPARTMENTS			
TITLE <u>Parks - Training for Employee</u>		TITLE <u>Museum - Health Insurance</u>	
ACCT.# <u>001-5065-000-277</u>		ACCT# <u>001-5064-000-160</u>	3,000.00
TITLE <u>Parks - Photocopy</u>		TITLE <u>Museum - Health Insurance</u>	
ACCT.# <u>001-5065-000-347</u>		ACCT# <u>001-5064-000-160</u>	950.00
		Total	14,090.00

Explain, in COMPLETE DETAIL, the reason for the transfer.

REASON:

Transfer needed as a result of clearing out the Health Insurance Internal Service Fund; the net of claims, prescriptions and administrative costs to include EBMS, 6th Degrees and stop loss insurance. This was proportionately distributed based upon annual amount charged to each department based upon number of employees each month.

Is this transfer within your department? (Circle One) Yes No

Is this transfer within your division? (Circle One) Yes No

DEPT. HEAD: _____

DATE: _____

DIVIS HEAD: _____

DATE: _____

FINANCE: _____

DATE: _____

ADMINISTRATOR: _____

DATE: _____

Journal Entry # _____

DATE: _____