

# ORDINANCE

**RE: Budget Amendment for Coroner's Receipt of State Funds**

WHEREAS, the County Coroner has received State funds from the Department of Public Health; and,

WHEREAS, the revenue, while annual could not be budgeted ahead of time as it is dispersed by the State based upon revenue from a surcharge paid for death certificates to be used for equipment and lab facilities; and,

WHEREAS, such additional revenue can be added to the Special Circumstances line in the Coroner's budget.

NOW, THEREFORE BE IT RESOLVED by the County Board of Vermilion County, Illinois, that the Coroner's budget be accordingly amended to show the receipt of such grant funds as set out in the request for budget amendment attached here to and incorporated herein by reference.

*This budget amendment requires two thirds approval by the full County Board*

**FROM ILLINOIS DEPARTMENT  
OF PUBLIC HEALTH:**

**TO APPROPRIATION NUMBER:**

001.101.00.02530	\$9191.00	001.350.00.04238	\$9191.00
General Fund		Special Circumstance	

PRESENTED, APPROVED AND RESOLVED by the County Board of Vermilion County, Illinois at the June 13, 2017 A.D. Session.

DATED this 13<sup>th</sup> day of June 2017 A.D.

AYE 24 NAY \_\_\_\_\_ ABSTAIN \_\_\_\_\_ ABSENT 3

*Michael T. Mason*  
Chairman, Vermilion County Board

ATTEST:

Cathy Johnson  
Clerk of the County

Approved by Public Safety Meeting: Chuck Nesbitt (Y) N A  
Chairman

Craig Golden (Y) N A

Tom Morse (Y) N A

Bruce Stark (Y) N A

Becky Stark (Y) N A

Chad Turner Y N (A) Absent

Crisi Walls (Y) N A

Resolution No. 17-0602

**Request for Amendment  
Fiscal Budget  
2016 - 2017**

Dept: CORONER

Date: May 5, 2017

Account Number	Account Description	Original Appr.	Additional	To Read
<u>001.350.00.04238</u>	<u>Special Circumstance</u>	\$ <u>0</u>	\$ <u>9,191</u>	<u>9191.00</u>
_____	_____	\$ _____	\$ _____	_____
_____	_____	\$ _____	\$ _____	_____
_____	_____	\$ _____	\$ _____	_____
_____	_____	\$ _____	\$ _____	_____
_____	_____	\$ _____	\$ _____	_____
_____	_____	\$ _____	\$ _____	_____
_____	_____	\$ _____	\$ _____	_____

**Narrative:**

**This money is from the Illinois Department of Public Health's death certificate surcharge fund.  
It is dispersed annually as a grant to all County Coroners in the State to be used for equipment and lab facilities.**

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Department Head: Jane McFadden

**Approved By:**

\_\_\_\_\_ Committee

\_\_\_\_\_ Chairman

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\_\_\_\_\_ Finance Committee

\_\_\_\_\_ Chairman

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Dated: \_\_\_\_\_

Dated: \_\_\_\_\_