

**Annual Appropriations
Coshocton County General Health District
Resolution 2019-31**

BE IT RESOLVED by the District Board of Health for Coshocton County, Ohio, that to provide for the current expenses and other expenditures of said District, during the fiscal year ending December 31, 2020, the following sums be and the same are hereby set aside and appropriated for the several purposes for which expenditures are to be made for and during said fiscal year, as follows, viz:

That there be appropriated from the District Board of Health:

Maternal and Child Health Center

| | | |
|------------------|------------------------------|-------------------|
| 019-0100-5102.00 | Salaries | 52,900.00 |
| 019-0100-5103.00 | Employee Insurance Bonus | .00 |
| 019-0100-5110.00 | O.P.E.R.S. | 7,935.00 |
| 019-0100-5111.00 | Worker's Compensation | 485.00 |
| 019-0100-5113.00 | Health/Life/Dental Insurance | 815.00 |
| 019-0100-5115.00 | Medicare Tax – Employer | 926.00 |
| 019-0100-5200.00 | Office Supplies | 1,000.00 |
| 019-0100-5200.01 | Medical Supplies | 6,000.00 |
| 019-0100-5210.00 | Equipment | .00 |
| 019-0100-5260.00 | Contract Services | 26,500.00 |
| 019-0100-5300.00 | Travel/Training | 200.00 |
| 019-0100-5400.00 | Other Expenses | 3,400.00 |
| | Total Budget | 100,161.00 |

District Health

| | | |
|------------------|------------------------------|-------------------|
| 020-0100-5102.00 | Salaries | 147,074.00 |
| 020-0100-5103.00 | Employee Insurance Bonus | 600.00 |
| 020-0100-5110.00 | O.P.E.R.S. | 22,062.00 |
| 020-0100-5111.00 | Worker's Compensation | 1,284.00 |
| 020-0100-5113.00 | Health/Life/Dental Insurance | 29,368.00 |
| 020-0100-5115.00 | Medicare Tax | 2,207.00 |
| 020-0100-5200.00 | Office Supplies | 3,000.00 |
| 020-0100-5200.01 | Medical Supplies | 5,000.00 |
| 020-0100-5210.00 | Equipment | 2,000.00 |
| 020-0100-5260.00 | Contract Services | 4,549.00 |
| 020-0100-5300.00 | Travel/Training | 5,000.00 |
| 020-0100-5400.00 | Other Expenses | 38,339.00 |
| 020-0100-5400.01 | Board Expenses | 1,000.00 |
| 020-0100-5999.00 | Transfer Out | 2,000.00 |
| 020-0200-5260.00 | Contract Services to Combine | 108,000.00 |
| | Total Budget | 371,483.00 |

Swimming Pool Program

| | | |
|------------------|-----------------------|-----------------|
| 021-0100-5102.00 | Salaries | 3,221.00 |
| 021-0100-5110.00 | O.P.E.R.S. | 484.00 |
| 021-0100-5111.00 | Worker's Compensation | 31.00 |
| 021-0100-5115.00 | Medicare Tax | 49.00 |
| 021-0100-5200.00 | Supplies | 500.00 |
| 021-0100-5470.00 | State Remittance Fees | 860.00 |
| | Total Budget | 5,145.00 |

Coshocton County Board of Health
Annual Appropriation Resolution
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WIC

| | | |
|------------------|------------------------------|------------|
| 022-0100-5102.00 | Salaries | 157,572.00 |
| 022-0100-5103.00 | Employee Insurance Bonus | 400.00 |
| 022-0100-5110.00 | O.P.E.R.S. | 23,636.00 |
| 022-0100-5111.00 | Worker's Compensation | 2,356.00 |
| 022-0100-5113.00 | Health/Life/Dental Insurance | 8,917.00 |
| 022-0100-5115.00 | Medicare Tax – Employer | 2,364.00 |
| 022-0100-5210.00 | Equipment | .00 |
| 022-0100-5260.00 | Contract Services | 800.00 |
| 022-0100-5200.00 | Other Direct Costs | 9,900.00 |
| | Total Budget | 205,945.00 |

WIC Reserve

| | | |
|------------------|----------------------------------|-----|
| 023-0100-5102.00 | Retirement / Termination Pay-out | .00 |
|------------------|----------------------------------|-----|

Private Water Systems

| | | |
|------------------|-------------------------|-----------|
| 024-0100-5102.00 | Salaries | 3,990.00 |
| 024-0100-5110.00 | O.P.E.R.S. | 599.00 |
| 024-0100-5111.00 | Worker's Compensation | 196.00 |
| 024-0100-5113.00 | Life/Health/Dental | 14,670.00 |
| 024-0100-5115.00 | Medicare Tax – Employer | 70.00 |
| 024-0100-5200.00 | Supplies | 500.00 |
| 024-0100-5260.00 | Contract Services | 6,000.00 |
| 024-0100-5470.00 | State Remittance Fees | 8,000.00 |
| 024-0100-5999.00 | Transfer to Reserve | .00 |
| | Total Budget | 34,025.00 |

Construction and Demolition Debris Program

| | | |
|------------------|-------------------------|--------|
| 025-0100-5102.00 | Salaries | .00 |
| 025-0100-5110.00 | O.P.E.R.S. | .00 |
| 025-0100-5111.00 | Worker's Compensation | .00 |
| 025-0100-5115.00 | Medicare Tax – Employer | .00 |
| 025-0100-5200.00 | Supplies | .00 |
| 025-0100-5470.00 | E.P.A. Remittance Fees | 500.00 |
| | Total Budget | 500.00 |

Campgrounds

| | | |
|------------------|-------------------------|----------|
| 026-0100-5102.00 | Salaries | 3,437.00 |
| 026-0100-5110.00 | O.P.E.R.S. | 516.00 |
| 026-0100-5111.00 | Worker's Compensation | 44.00 |
| 026-0100-5115.00 | Medicare Tax – Employer | 52.00 |
| 026-0100-5200.00 | Supplies | 500.00 |
| 026-0100-5470.00 | State Remittance Fees | 1,650.00 |
| | Total Budget | 6,199.00 |

Food Service and Retail Food Establishments Program

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|------------------|-------------------------|-----------|
| 028-0100-5102.00 | Salaries | 17,972.00 |
| 028-0100-5110.00 | O.P.E.R.S. | 2,696.00 |
| 028-0100-5111.00 | Worker's Compensation | 162.00 |
| 028-0100-5113.00 | Life/Health/Dental | 14,670.00 |
| 028-0100-5115.00 | Medicare Tax – Employer | 270.00 |
| 028-0100-5200.00 | Supplies | 1,000.00 |
| 028-0100-5210.00 | Equipment | .00 |
| 028-0100-5470.00 | State Remittance Fees | 2,500.00 |
| 028-0100-5999.00 | Transfer to Reserve | .00 |
| | Total Budget | 39,270.00 |

CFLP Solid Waste Grant

| | | |
|------------------|------------------------------|-----------|
| 130-0100-5102.00 | Salaries | 29,116.00 |
| 130-0100-5110.00 | OPERS | 4,368.00 |
| 130-0100-5111.00 | Worker's Compensation | 283.00 |
| 130-0100-5113.00 | Health/Life/Dental Insurance | 11,688.00 |
| 130-0100-5115.00 | Medicare Tax – Employer | 437.00 |
| 130-0100-5200.00 | Supplies | 500.00 |
| 130-0100-5300.00 | Travel/Training | 2,000.00 |
| 130-0100-5400.01 | Reimbursement | 5,000.00 |
| | Total Budget | 53,392.00 |

Solid Waste Program

| | | |
|------------------|------------------------------|-----------|
| 130-0200-5102.00 | Salaries | 2,161.00 |
| 130-0200-5103.00 | Employee Insurance Bonus | .00 |
| 130-0200-5110.00 | OPERS | 314.00 |
| 130-0200-5111.00 | Worker's Compensation | 21.00 |
| 130-0200-5113.00 | Health/Life/Dental Insurance | .00 |
| 130-0200-5115.00 | Medicare | 33.00 |
| 130-0200-5210.00 | Equipment | .00 |
| 130-0200-5400.00 | Other Expenses | .00 |
| 130-0200-5470.00 | E.P.A. Remittance Fees | 30,000.00 |
| 130-0200-5999.00 | Transfer to Reserve | 5,000.00 |
| | Total Budget | 37,529.00 |

Household Sewage Treatment Systems

| | | |
|------------------|-----------------------|-----------|
| 131-0100-5102.00 | Salaries | 41,147.00 |
| 131-0100-5110.00 | O.P.E.R.S. | 6,172.00 |
| 131-0100-5111.00 | Worker's Compensation | 679.00 |
| 131-0100-5113.00 | Life/Health/Dental | 14,670.00 |
| 131-0100-5115.00 | Medicare | 721.00 |
| 131-0100-5200.00 | Supplies | 1,000.00 |
| 131-0100-5210.00 | Equipment | .00 |
| 131-0100-5470.00 | Remittance Fees | 7,554.00 |
| 131-0100-5999.00 | Transfer to Reserve | .00 |
| | Total Budget | 71,943.00 |

Public Health Infrastructure Grant

| | | |
|------------------|------------------------------|-----------|
| 132-0100-5102.00 | Salaries | 45,173.00 |
| 132-0100-5103.00 | Employee Insurance Bonus | .00 |
| 132-0100-5110.00 | O.P.E.R.S. | 6,550.00 |
| 132-0100-5111.00 | Worker's Compensation | 696.00 |
| 132-0100-5113.00 | Health/Life/Dental Insurance | 4,643.00 |
| 132-0100-5115.00 | Medicare Tax – Employer | 791.00 |
| 132-0100-5200.00 | Other Direct Costs | 1,460.00 |
| 132-0100-5210.00 | Equipment | .00 |
| 132-0100-5260.00 | Contract Services | 8,980.00 |
| | Total Budget | 68,293.00 |

District Health Reserve

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|------------------|----------------------------------|-----|
| 135-0100-5102.00 | Retirement / Termination Pay-out | .00 |
|------------------|----------------------------------|-----|

Environmental Reserve

| | | |
|------------------|----------------------------------|-----|
| 136-0100-5102.00 | Retirement / Termination Pay-out | .00 |
|------------------|----------------------------------|-----|

AND, BE IT FURTHER RESOLVED THAT: the following anticipated revenue be certified.

Maternal and Child Health Center

| | | |
|---------------------------|--------------------------------|------------|
| | Estimated Carry Over from 2019 | 46,711.00 |
| 019-0100-4001.02 | Inter-governmental/Local | .00 |
| 019-0100-4006.00 | Patient Fees | 4,500.00 |
| 019-0100-4006.01 | Medicaid | 26,000.00 |
| 019-0100-4006.02 | Private Insurance | .00 |
| 019-0100-4006.04 | Fee for Services | .00 |
| 019-0100-4006.06 | Medicaid Admin. Claims | 8,000.00 |
| 019-0100-4010.00 | Charitable Contributions | 46,000.00 |
| Total Anticipated Revenue | | 84,500.00 |
| Total Funds Available | | 131,211.00 |

District Health

| | | |
|---------------------------|-------------------------------------|------------|
| | Estimated Carry Over from 2019 | 161,131.00 |
| 020-0100-4000.00 | WIC Federal Funds | 20,500.00 |
| 020-0100-4001.00 | State Subsidy | 7,079.00 |
| 020-0100-4001.02 | Intergovernmental/Local | 1,500.00 |
| 020-0100-4002.00 | Property Taxes | 150,000.00 |
| 020-0100-4003.00 | BCMH | 24,000.00 |
| 020-0100-4003.01 | ODH Fees – Combined Health District | .00 |
| 020-0100-4003.02 | BCCP | .00 |
| 020-0100-4003.03 | Patient Fees | 4,000.00 |
| 020-0100-4003.05 | ODH Fees – State | .00 |
| 020-0100-4003.06 | Tattoo License Fees | 225.00 |
| 020-0100-4005.00 | OMHC Contract | 2,725.00 |
| 020-0100-4006.06 | Medicaid Admin. Claims | 20,000.00 |
| 020-0100-4010.00 | Vital Statistics | 26,000.00 |
| 020-0100-4011.00 | Charitable Contributions | .00.00 |
| 020-0100-4013.00 | Miscellaneous | .00 |
| Total Anticipated Revenue | | 256,029.00 |
| Total Funds Available | | 417,160.00 |

Swimming Pool Program

| | | |
|--------------------------------|--------------|----------|
| Estimated Carry Over from 2019 | | 2,400.00 |
| 021-0100-4001.00 | License Fees | 3,485.00 |
| Total Anticipated Revenue | | 3,485.00 |
| Total Funds Available | | 5,885.00 |

WIC

| | | |
|--------------------------------|---------------|------------|
| Estimated Carry Over from 2019 | | 20,371.00 |
| 022-0100-4001.00 | Federal Funds | 205,317.00 |
| Total Anticipated Revenue | | 205,317.00 |
| Total Funds Available | | 225,688.00 |

Private Water Systems

| | | |
|--------------------------------|----------------------|-----------|
| Estimated Carry Over from 2019 | | 6,129.00 |
| 024-0100-4001.00 | Installation Permits | 26,100.00 |
| 024-0100-4002.00 | Alteration Permits | 340.00 |
| 024-0100-4002.01 | Water Haulers | 160.00 |
| 024-0100-4003.00 | Water Testing | 5,500.00 |
| 024-0100-4004.00 | Well Certifications | 450.00 |
| Total Anticipated Revenue | | 32,550.00 |
| Total Funds Available | | 38,679.00 |

Construction and Demolition Debris Program

| | | |
|--------------------------------|--------------|----------|
| Estimated Carry Over from 2019 | | 2,659.00 |
| 025-0100-4001.00 | Tipping Fees | 1,000.00 |
| Total Anticipated Revenue | | 1,000.00 |
| Total Funds Available | | 3,659.00 |

Campgrounds

| | | |
|--------------------------------|-------------------------|----------|
| Estimated Carry Over from 2019 | | 3,032.00 |
| 026-0100-4001.00 | Campground License Fees | 5,264.00 |
| Total Anticipated Revenue | | 5,264.00 |
| Total Funds Available | | 8,296.00 |

Food Service and Retail Food Establishments Program

| | | |
|--------------------------------|--------------------|-----------|
| Estimated Carry Over from 2019 | | 3,924.00 |
| 028-0100-4001.00 | FSO Licenses | 22,785.00 |
| 028-0100-4002.00 | Temporary Licenses | 1,500.00 |
| 028-0100-4003.00 | RFE Licenses | 12,775.00 |
| Total Anticipated Revenue | | 37,060.00 |
| Total Funds Available | | 40,984.00 |

Solid Waste

| | | |
|--------------------------------|-----------------------|------------|
| Estimated Carry Over from 2019 | | 47,724.00 |
| 130-0100-4001.00 | Landfill License Fees | 35,000.00 |
| 130-0100-4002.00 | Hauler Fees | 1,350.00 |
| 130-0100-4006.00 | CFLP Grant | 47,308.00 |
| Total Anticipated Revenue | | 83,658.00 |
| Total Funds Available | | 131,382.00 |

Household Sewage Treatment Systems

| | | |
|--------------------------------|-------------------|-----------|
| Estimated Carry Over from 2019 | | 31,836.00 |
| 131-0100-4004.00 | Certifications | 200.00 |
| 131-0100-4005.00 | Plan Reviews | 8,250.00 |
| 131-0100-4005.01 | Installations | 22,515.00 |
| 131-0100-4005.02 | Alterations | 1,260.00 |
| 131-0100-4005.03 | Operation Permits | 7,000.00 |
| 131-0100-4005.04 | Installers | 3,400.00 |
| 131-0100-4005.05 | Vehicle Permits | 600.00 |
| 131-0100-4005.06 | Variances | .00 |
| 131-0100-4010.00 | Split/Lot Reviews | 15,000.00 |
| Total Anticipated Revenue | | 58,225.00 |
| Total Funds Available | | 90,061.00 |

Public Health Emergency Preparedness Grant

| | | |
|--------------------------------|---------------|-----------|
| Estimated Carry Over from 2019 | | 5,360.00 |
| 132-0100-4001.01 | Federal Funds | 67,392.00 |
| Total Anticipated Revenue | | 67,392.00 |
| Total Funds Available | | 72,752.00 |

District Health Reserve

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|------------------|-------------|----------|
| 135-0100-4009.00 | Transfer In | 2,000.00 |
|------------------|-------------|----------|

Environmental Reserve

| | | |
|------------------|-------------|----------|
| 136-0100-4009.00 | Transfer In | 6,000.00 |
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_____ Moved to adopt the Resolution

_____ Seconded the Motion.

Those approving were:

| | |
|--------------------|-------|
| _____ | _____ |
| Scott Limburg | Date |
| _____ | _____ |
| Donald Wells | Date |
| _____ | _____ |
| Jeff Poland D.V.M. | Date |
| _____ | _____ |
| Linda Weber | Date |
| _____ | _____ |
| Robert Gwinn M.D. | Date |