Budget Revision # _____

Item No. _____

Board Action Date _____

Caldwell County Board of Commissioners

BUDGET REVISION

Board Meeting _____

Subject: 415 Breastfeeding Peer Counselor

Background and explanation for the Budget Revision:

The Caldwell County Health Department received an Agreement Addendum in the amount of $29,869. This Agreement Addendum allows for the LHD WIC dept to support a Breastfeeding Peer Counselor.

The Budget Ordinance is hereby amended by making a Supplemental Appropriation with appropriations and revenues being

SUPPLEMENTAL APPROPRIATION

Revenues: Increase / Decrease (Circle One)			**Expenditures: Increase / Decrease (Circle One)**		
Line Item #	Title	Amount	Line Item #	Title	Amount
10.5167.331501	WIC	29,869.00	10.5167.412100	Salary	29,869.00
Total		**29,869.00**	**Total**		**29,869.00**

Attachments (Yes or No):

Public Hearing (Yes or No):

Distribution:
Original - Finance Office
Duplicate - Clerk to the Board
Triplicate - Department Head

Staff Recommendation:

Board Action:

Department Head	Date	Finance Director	Date	County Manager	Date
Anna Cook	7/11/25		7/11/25		