

COUNTY OF CLEVELAND, NORTH CAROLINA
AGENDA FOR THE REGULAR COMMISSION MEETING

February 3, 2026

6:00 PM

County Commissioners' Chambers

-
- **Call to Order and Determination of a Quorum** - Commission Chair
 - **Pledge of Allegiance and Invocation** (Please stand for the Pledge of Allegiance and remain standing for the Invocation)
 - **Recognition of Elected Officials**
 - **Recognition of Veterans**
 - **Recognition of Law Enforcement**
 - **Recognition of County Department Heads**

1. MOTION TO ADOPT THE PROPOSED AGENDA

(Only emergency items shall be added to the agenda. Upon approval of the Commission Chair and County Commission, the item will be added.)

SPECIAL PRESENTATION

- 2. Ames Copper Group
Dayne Willis, President of Operations
- 3. Catawba Nation Foundation
Kristine Urrutia, Executive Director

4. PUBLIC COMMENT

Individuals who wish to address the Board during the public comment period shall register with the Clerk to the Board providing their true name and address on the sign-up sheet. Each individual wishing to address the Board shall only register themselves and will not be permitted to enter the name of any other individual, as the sign-up sheet is a public record

available for inspection. The sign-up sheet will be available fifty (50) minutes prior to the start of each meeting. The sign-up sheet will be collected ten (10) minutes prior to the start of each meeting by the Clerk to the Board. Individuals who have not entered their true name and address on the sign-up sheet within the designated time period will not be permitted to address the Board, unless the Chair, in the Chair's sole discretion, permits.

Citizen speakers will be acknowledged in the order in which they signed up to speak and will address all comments to the Board as a whole and not one individual commissioner. Speakers will address the Board from the speaker's podium at the front of the room and will begin their remarks by stating their name and address. Discussions between Speakers and members of the audience will not be allowed. Public comment is not intended to require the Board to answer any impromptu questions. Speakers are expected to be civil in their language and presentation and are prohibited from using profanity or making threats of violence or personal attacks against any person. All comments from the speaker shall be issue-oriented and directly related to a subject that the Commissioners have oversight and authority. Each speaker is allotted three (3) minutes to address the Board. A speaker is not permitted to share, reserve or relinquish any remaining time allocated to them to another speaker. Any comments where the primary purpose is to promote a business or candidacy shall not be allowed.

Any written materials, petitions, photographs and/or other documents may be delivered to the Clerk to the Board. The County is not permitted to accept any external data storage devices (thumb drives, flash drives, memory cards or similar device). In accordance with the Board's adopted Rules of Procedure, Commissioners shall reserve responses, if any, for the Commissioner comment period on the agenda.

A.

5. **CONSENT AGENDA**

Motion to approve the following Consent Agenda items: (Consent items will be adopted with a single motion, second and vote, unless a request for removal from the Consent Agenda is heard from a Commissioner.)

- | | | |
|----|---|----------------------------|
| A. | <u>Tax</u>
<u>Aministration</u> | Order to Advertise |
| B. | <u>Finance</u>
<u>Department</u> | Budget Transfer Summary |
| C. | <u>Health</u>
<u>Department</u> | Budget Amendment (BNA#040) |
| D. | <u>Health</u>
<u>Department</u> | Budget Amendment (BNA#041) |
| E. | <u>Board of</u>
<u>Elections</u> | Budget Amendment (BNA#042) |

- F. **Planning** Request to Set a Public Hearing on Tuesday, March 17, 2026, for
 Department Planning Case 16-02 Request to Rezone 132, 136, and 140 Jim
 Patterson Road from General Business-Conditional Use (GB-
 CU) to General Business-Conditional Use (GB-CU) to Develop a
 Recreational Vehicle Park
- G. **Economic** Request to Set a Public Hearing on Tuesday, March 17, 2025, for
 Development Project Maple Leaf

PUBLIC HEARINGS

Individuals who wish to address the Board during the public hearing shall register with the Clerk to the Board providing their true name and address on the sign-up sheet. Each individual wishing to address the Board shall only register themselves and will not be permitted to enter the name of any other individual, as the sign-up sheet is a public record available for inspection. The sign-up sheet will be available fifty (50) minutes prior to the start of each meeting. The sign-up sheet will be collected ten (10) minutes prior to the start of each meeting by the Clerk to the Board. Individuals who have not entered their true name and address on the sign-up sheet within the designated time period will not be permitted to address the Board, unless the Chair, in the Chair's sole discretion, permits.

Citizen speakers will be acknowledged in the order in which they signed up to speak and will address all comments to the Board as a whole and not one individual Commissioner. Speakers will address the Board from the speaker's podium at the front of the room and will begin their remarks by stating their true name and address. Discussions between speakers and members of the audience will not be allowed. A public hearing is not intended to require the Board to answer any impromptu questions. Speakers are expected to be civil in their language and presentation.

All comments from the speaker shall be directly related to the subject of the public hearing. Each speaker is allotted five (5) minutes to address the Board. A speaker is not permitted to share, reserve or relinquish any remaining time allocated to them to another speaker. Any written materials, petitions, photographs and/or other documents may be delivered to the Clerk to the Board. The County is not permitted to accept any external data storage devices (thumb drives, flash drives, memory cards or similar device). In accordance with the Board's adopted Rules of Procedure, Commissioners shall reserve responses, if any, for the Commissioner comment period on the agenda.

6. Planning Case 26-01 Request to Rezone 109 Catalina Court from Restricted
 Residential (RR) to Rural Residential (RU)

Chris Martin, Planning Director

REGULAR AGENDA

7. Sanitary District Board

Jonathan Sink, County Attorney

BOARD APPOINTMENTS

8. Board of Adjustment
Phyllis Nowlen, Clerk to the Board
9. Planning Board
Phyllis Nowlen, Clerk to the Board

ADJOURN

The next meeting of the Cleveland County Board of Commissioners will be held on Tuesday, March 17, 2026, at 6:00 p.m. in the Commissioners' Chambers.

COUNTY OF CLEVELAND, NORTH CAROLINA

AGENDA ITEM SUMMARY

Ames Copper Group

Department:

Agenda Title: Ames Copper Group

Agenda Summary: Dayne Willis, President of Operations

Proposed Action:

ATTACHMENTS:

File Name

Description

No Attachments Available

COUNTY OF CLEVELAND, NORTH CAROLINA

AGENDA ITEM SUMMARY

Catawba Nation Foundation

Department:

Agenda Title: Catawba Nation Foundation

Agenda Summary: Kristine Urrutia, Executive Director

Proposed Action:

ATTACHMENTS:

File Name

Description

No Attachments Available

COUNTY OF CLEVELAND, NORTH CAROLINA

AGENDA ITEM SUMMARY

Public Comment

Department:

Agenda Title:

Agenda Summary:

Proposed Action:

ATTACHMENTS:

File Name

Description

No Attachments Available

COUNTY OF CLEVELAND, NORTH CAROLINA

AGENDA ITEM SUMMARY

Order to Advertise

Department: Tax Administration

Agenda Title: Order to Advertise

Agenda Summary:

Proposed Action:

ATTACHMENTS:

File Name	Description
<input type="checkbox"/> Order_to_Advertise.pdf	Order to Advertise

MEMORANDUM

TO: CLEVELAND COUNTY BOARD OF COMMISSIONERS

FROM: SHERRY LAVENDER, TAX ADMINISTRATOR

DATE: JANUARY 27, 2026

SUBJECT: ADVERTISEMENT OF TAX LIENS ON REAL PROPERTY

Per N.C.G.S. 105-369, uncollected taxes for the current year that are a lien on real property, must be advertised in a newspaper having general circulation in the taxing unit. Upon receipt of the Tax Collector's report in February, the governing body must order the Tax Collector to advertise the tax liens.

An order is hereby requested that:

The Tax Collector, during the time frame between March 18th and March 23rd shall advertise those tax liens on real property that remain unpaid as of March 8th. Advertisement shall be made in the manner provided by N.C.G.S. 105-369.

Please include this item on the **Consent Agenda** for the regular meeting scheduled for February 3, 2026. Thank you for your assistance.

COUNTY OF CLEVELAND, NORTH CAROLINA

AGENDA ITEM SUMMARY

Budget Transfer Summary

Department: Finance Department
Agenda Title: Budget Transfer Summary
Agenda Summary:
Proposed Action:

ATTACHMENTS:

File Name	Description
<input type="checkbox"/> Budget_Transfer_SUmmaries_02.03.2026.pdf	Budget Transfer Summary

County of Cleveland, North Carolina
Manager's Budget Summary
Presented at the February 6th, 2026 Board Meeting
Time Period Covered : 01/10/2026 to 01/23/2026
For Fiscal Year Ending June 30, 2026

BUD #	DATE SUBMITTED BY DEPT	Fund #	DEPT #	DEPT NAME	EXPLANATION	Account Description	BUDGET AMOUNT
26089	6/30/2025	486	245	Cap Proj-Clev Co Fair	Bld To Carryover A Certain Amount Needed For Fy26	Maint Contracts-Equip	\$ 1,673.29
26089	6/30/2025	486	245	Cap Proj-Clev Co Fair	Bld To Carryover A Certain Amount Needed For Fy26 Invoice	Const In Progress	\$ (1,673.29)
26091	1/14/2026	010	440	School Resource Officers	Move Funds To Cover Miff'S For Sro'S	Departmental Supply	\$ (498.00)
26091	1/14/2026	010	440	School Resource Officers	Move Funds To Cover Miff'S For Sro'S	Dues/Subscriptions	\$ 2,463.00
26091	1/14/2026	010	440	School Resource Officers	Move Funds To Cover Miff'S For Sro'S	Controlled Property Exp	\$ (310.00)
26091	1/14/2026	010	440	School Resource Officers	Move Funds To Cover Miff'S For Sro'S	Capital Equipment	\$ (1,655.00)
26092	1/14/2026	010	441	Sheriff'S Office	Move Funds To Cover Repairs On Drone And Camera Sys	Repairs On Equipment	\$ 910.00
26092	1/14/2026	010	441	Sheriff'S Office	Move Funds To Cover Repairs On Drone And Camera Sys	Lease Purchase Payments	\$ (910.00)
26093	1/14/2026	010	444	Detention Center (Jail)	Move Funds To Cover Final Invoice Rec'D For	Laundry/Dry Cleaning	\$ (272.00)
26093	1/14/2026	010	444	Detention Center (Jail)	Move Funds To Cover Final Invoice Rec'D For Dishwasher Lease Terminated	Rental/Lease Equip/Other	\$ 272.00
26095	1/23/2026	054	474	Collections/Manned Sites	To Cover A Negative And An Invoice For Landfill Gate	Maint Bldg/Grounds	\$ 25,000.00
26095	1/23/2026	054	474	Collections/Manned Sites	To Cover A Negative And An Invoice For Landfill Gate	Motor Fuels/Oils	\$ (25,000.00)
26096	6/30/2025	010	446	Emergency Medical Service	Fy25 Last Minute Transfers	Departmental Supply	\$ 405.25
26096	6/30/2025	010	446	Emergency Medical Service	Fy25 Last Minute Transfers	Automotive Supplies	\$ 140.30
26096	6/30/2025	054	473	Disposal/Landfill	Fy25 Last Minute Transfers	Off Road Vehicle Supplies	\$ 804,878.54
26096	6/30/2025	010	446	Emergency Medical Service	Fy25 Last Minute Transfers	Cap Equip-Major	\$ (140.30)
26096	6/30/2025	054	473	Disposal/Landfill	Fy25 Last Minute Transfers	Cap Equip-Major	\$ (804,878.54)
26096	6/30/2025	010	446	Emergency Medical Service	Fy25 Last Minute Transfers	Cap Equip-Major Repairs	\$ (405.25)
26097	1/23/2026	010	998	Contingency	Bld There Was A Bna 024 That Was Incorrect And A New	Emerg & Contingency	\$ 10,456.52
26097	1/23/2026	010	495	Cooperative Extension	Bld There Was A Bna 024 That Was Incorrect And A New	Fund Balance	\$ (10,456.52)
26097	1/23/2026	010	495	Cooperative Extension	Bld There Was A Bna 024 That Was Incorrect And A New Amendment Was Sent To Me And I Misunderstood The	Summer Fun Activities	\$ (261.00)
26097	1/23/2026	010	495	Cooperative Extension	Bld There Was A Bna 024 That Was Incorrect And A New Amendment Was Sent To Me And I Misunderstood The	4H Program Enhancements	\$ (4,685.00)
26097	1/23/2026	010	495	Cooperative Extension	Bld There Was A Bna 024 That Was Incorrect And A New Amendment Was Sent To Me And I Misunderstood The	Summer Fun Activities	\$ (1,014.16)
26097	1/23/2026	010	495	Cooperative Extension	Bld There Was A Bna 024 That Was Incorrect And A New Amendment Was Sent To Me And I Misunderstood The	Corn Growers Assoc Activy	\$ (3,956.36)
26097	1/23/2026	010	495	Cooperative Extension	Bld There Was A Bna 024 That Was Incorrect And A New Amendment Was Sent To Me And I Misunderstood The	Horticulture Activities	\$ (40.00)
26097	1/23/2026	010	410	General Revenues	Bld There Was A Bna 024 That Was Incorrect And A New	Fund Balance	\$ 10,456.52
26097	1/23/2026	010	495	Cooperative Extension	Bld There Was A Bna 024 That Was Incorrect And A New	Master Gardeners	\$ (500.00)
26098	1/23/2026	010	542	Animal/Rabies Control	Bld To Fund Contracted Services For Vet Contracted In	Salaries/Wages-Reg	\$ (28,000.00)
26098	1/23/2026	010	542	Animal/Rabies Control	Bld To Fund Contracted Services For Vet Contracted In	Contracted Services	\$ 28,000.00
2696	1/12/2026	486	245	Cap Proj-Clev Co Fair	Co 202653 To Carryover Exact Amount For An Invoice	Fund Balance Appropriated	\$ 42,679.72
2696	1/12/2026	486	245	Cap Proj-Clev Co Fair	Co 202653 To Carryover Exact Amount For An Invoice	Maint Contracts-Equip	\$ 42,679.72
2697	1/12/2026	010	495	Cooperative Extension	Co 202654 Grg Donations	Grg Donations	\$ 1,582.42
2697	1/12/2026	010	495	Cooperative Extension	Co 202654 Grg Donations	Grg Donations	\$ 1,582.42
2698	1/14/2026	012	530	Health Administration	Carryover Left Over Workforce Development Grants	Federal Govt Grants	\$ 126,551.00
2698	1/14/2026	012	530	Health Administration	Carryover Left Over Workforce Development Grants	Contracted Labor	\$ 126,551.00
2699	1/14/2026	012	530	Health Administration	Co 202655 Hurricane Relief Grant	State Government	\$ 412,295.00
2699	1/14/2026	012	530	Health Administration	Co 202655 Hurricane Relief Grant	Emergency/Contingen cy	\$ 412,295.00
2700	1/15/2026	012	544	Dental Clinic	Co202657 Carryover Dental Clinic Leftover Amounts That Were In Accounts Like Contingency	Controlled Property Exp	\$ (5,000.00)
2700	1/15/2026	012	544	Dental Clinic	Co202657 Carryover Dental Clinic Leftover Amounts That Were In Accounts Like Contingency	License/Permit/Certific ate	\$ (4,000.00)
2700	1/15/2026	012	530	Health Administration	Co202657 Carryover Dental Clinic Leftover Amounts That Were In Accounts Like Contingency	Fund Balance	\$ (500,000.00)
2700	1/15/2026	012	544	Dental Clinic	Co202657 Carryover Dental Clinic Leftover Amounts That Were In Accounts Like Contingency	Postage	\$ (1,000.00)
2700	1/15/2026	012	544	Dental Clinic	Co202657 Carryover Dental Clinic Leftover Amounts That Were In Accounts Like Contingency	Hospital/Doctor Fees	\$ (300,000.00)
2700	1/15/2026	012	544	Dental Clinic	Co202657 Carryover Dental Clinic Leftover Amounts That Were In Accounts Like Contingency	Medicine & Supplies	\$ (20,000.00)
2700	1/15/2026	012	544	Dental Clinic	Co202657 Carryover Dental Clinic Leftover Amounts That Were In Accounts Like Contingency	Contracted Services	\$ (100,000.00)
2700	1/15/2026	012	544	Dental Clinic	Co202657 Carryover Dental Clinic Leftover Amounts That Were In Accounts Like Contingency	Departmental Supply	\$ (10,000.00)
2700	1/15/2026	012	544	Dental Clinic	Co202657 Carryover Dental Clinic Leftover Amounts That Were In Accounts Like Contingency	Dues/Subscriptions	\$ 5,000.00
2700	1/15/2026	012	544	Dental Clinic	Co202657 Carryover Dental Clinic Leftover Amounts That Were In Accounts Like Contingency	Hospital/Doctor Fees	\$ 300,000.00
2700	1/15/2026	012	544	Dental Clinic	Co202657 Carryover Dental Clinic Leftover Amounts That Were In Accounts Like Contingency	Contracted Labor	\$ 50,000.00
2700	1/15/2026	012	544	Dental Clinic	Co202657 Carryover Dental Clinic Leftover Amounts That Were In Accounts Like Contingency	Telecommunications	\$ 5,000.00
2700	1/15/2026	012	544	Dental Clinic	Co202657 Carryover Dental Clinic Leftover Amounts That Were In Accounts Like Contingency	Departmental Supply	\$ 10,000.00
2700	1/15/2026	012	544	Dental Clinic	Co202657 Carryover Dental Clinic Leftover Amounts That Were In Accounts Like Contingency	Contracted Services	\$ 100,000.00
2700	1/15/2026	012	544	Dental Clinic	Co202657 Carryover Dental Clinic Leftover Amounts That Were In Accounts Like Contingency	Telecommunications	\$ (5,000.00)
2700	1/15/2026	012	544	Dental Clinic	Co202657 Carryover Dental Clinic Leftover Amounts That Were In Accounts Like Contingency	Contracted Labor	\$ (50,000.00)
2700	1/15/2026	012	544	Dental Clinic	Co202657 Carryover Dental Clinic Leftover Amounts That Were In Accounts Like Contingency	Medicine & Supplies	\$ 20,000.00
2700	1/15/2026	012	544	Dental Clinic	Co202657 Carryover Dental Clinic Leftover Amounts That Were In Accounts Like Contingency	License/Permit/Certific	\$ 4,000.00
2700	1/15/2026	012	544	Dental Clinic	Co202657 Carryover Dental Clinic Leftover Amounts That Were In Accounts Like Contingency	Dues/Subscriptions	\$ (5,000.00)
2700	1/15/2026	012	544	Dental Clinic	Co202657 Carryover Dental Clinic Leftover Amounts That Were In Accounts Like Contingency	Controlled Property	\$ 5,000.00
2700	1/15/2026	012	544	Dental Clinic	Co202657 Carryover Dental Clinic Leftover Amounts That Were In Accounts Like Contingency	Postage	\$ 1,000.00
2700	1/15/2026	012	544	Dental Clinic	Co202657 Carryover Dental Clinic Leftover Amounts That Were In Accounts Like Contingency	Fund Balance Appropriated	\$ 500,000.00

BUD #	DATE SUBMITTED BY DEPT	Fund #	DEPT #	DEPT NAME	EXPLANATION	Account Description	BUDGET AMOUNT
2700	1/15/2026	012	530	Health Administration	Co202657 Carryover Dental Clinic Leftover Amounts That Were In Accounts Like Contingency	Fund Balance Appropriated	\$ 500,000.00
2700	1/15/2026	012	544	Dental Clinic	Co202657 Carryover Dental Clinic Leftover Amounts That Were In Accounts Like Contingency	Contracted Services	\$ 100,000.00
2700	1/15/2026	012	544	Dental Clinic	Co202657 Carryover Dental Clinic Leftover Amounts That Were In Accounts Like Contingency	Dues/Subscriptions	\$ 5,000.00
2700	1/15/2026	012	544	Dental Clinic	Co202657 Carryover Dental Clinic Leftover Amounts That Were In Accounts Like Contingency	Departmental Supply	\$ 10,000.00
2700	1/15/2026	012	544	Dental Clinic	Co202657 Carryover Dental Clinic Leftover Amounts That Were In Accounts Like Contingency	Medicine & Supplies	\$ 20,000.00
2700	1/15/2026	012	544	Dental Clinic	Co202657 Carryover Dental Clinic Leftover Amounts That Were In Accounts Like Contingency	Hospital/Doctor Fees	\$ 300,000.00
2700	1/15/2026	012	544	Dental Clinic	Co202657 Carryover Dental Clinic Leftover Amounts That Were In Accounts Like Contingency	Contracted Labor	\$ 50,000.00
2700	1/15/2026	012	544	Dental Clinic	Co202657 Carryover Dental Clinic Leftover Amounts That Were In Accounts Like Contingency	Controlled Property	\$ 5,000.00
2700	1/15/2026	012	544	Dental Clinic	Co202657 Carryover Dental Clinic Leftover Amounts That Were In Accounts Like Contingency	License/Permit/Certific	\$ 4,000.00
2700	1/15/2026	012	544	Dental Clinic	Co202657 Carryover Dental Clinic Leftover Amounts That Were In Accounts Like Contingency	Telecommunications	\$ 5,000.00
2700	1/15/2026	012	544	Dental Clinic	Co202657 Carryover Dental Clinic Leftover Amounts That Were In Accounts Like Contingency	Postage	\$ 1,000.00
2707	1/22/2026	027	434	Arp	Co 202658 Arp Fund Carrover Amounts	Grants	\$ 899,155.77
2707	1/22/2026	027	434	Arp	Co 202658 Arp Fund Carrover Amounts	Bud Acc Only-Other	\$ 8,355,320.23
2707	1/22/2026	027	434	Arp	Co 202658 Arp Fund Carrover Amounts	Emerg & Contingency	\$ 237,997.00
2707	1/22/2026	027	434	Arp	Co 202658 Arp Fund Carrover Amounts	Federal Govt Grants	\$ 1,251,735.00
2707	1/22/2026	027	434	Arp	Co 202658 Arp Fund Carrover Amounts	Bud Acc Only-Other	\$ 8,260,794.00
2707	1/22/2026	027	434	Arp	Co 202658 Arp Fund Carrover Amounts	Capital Equipment	\$ 20,056.00

COUNTY OF CLEVELAND, NORTH CAROLINA

AGENDA ITEM SUMMARY

Health Department: Budget Amendment (BNA#040)

Department: Health Department

Agenda Title: Budget Amendment (BNA#040)

Agenda Summary:

Proposed Action:

ATTACHMENTS:

File Name	Description
<input type="checkbox"/> Health_BNA_040_budget_additional_funds_for_CVD_Wisewoman.pdf	BNA 040

Division of Public Health

Agreement Addendum

FY 25-26

Page 1 of 1

<u>Cleveland County Health Department</u> Local Health Department Legal Name	<u>Chronic Disease and Injury Section / Cancer Prevention and Control Branch</u> DPH Section / Branch Name
<u>465 CVD WISEWOMAN</u> Activity Number and Description	<u>Lisa M. Brown, 919-707-5326</u> <u>Lisa.M.Brown@dhhs.nc.gov</u> DPH Program Contact (name, phone number, and email)
<u>06/01/2025 – 05/31/2026</u> Service Period	<u>DPH Program Signature</u> Date (only required for a negotiable Agreement Addendum)
<u>07/01/2025 – 06/30/2026</u> Payment Period	
<input type="checkbox"/> Original Agreement Addendum <input checked="" type="checkbox"/> Agreement Addendum Revision # <u>1</u>	

I. **Background:** No change.

II. **Purpose:**

This Agreement Addendum Revision #1 increases the reimbursement per cardiovascular disease (CVD) screening service by \$10 per screening service and increases the reimbursement by \$10 for each second and third HBSS session up to the number of CVD screening services and HBSS sessions identified in the Scope of Work and Deliverables. This increase in reimbursement reflects an approved increase in the capitated rate by the program's federal funders, the Centers for Disease Control and Prevention (CDC). There are no other changes associated with this Revision.

III. **Scope of Work and Deliverables:** No change.

IV. **Performance Measures / Reporting Requirements:** No change.

V. **Performance Monitoring and Quality Assurance:** No change.

VI. **Funding Guidelines or Restrictions:**

As of December 1, 2025, this Agreement Addendum Revision #1 replaces Subparagraph a. under Paragraph 2, in its entirety with the following:

- a. For June 1, 2025 through November 30, 2025: The LHD shall be reimbursed **\$250** per CVD screening service and **\$15** for each second and third HBSS session, up to the number of CVD screening services and HBSS sessions identified in Section III, Paragraph I.
- For December 1, 2025 through May 31, 2026: The LHD shall be reimbursed **\$260** per CVD screening service and **\$25** for each second and third HBSS session, up to the number of CVD screening services and HBSS sessions remaining, as identified in Section III, Paragraph I.

<u>Health Director Signature</u> (use blue ink or verifiable digital signature)	<u>Date</u>
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LHD to complete: [For DPH to contact in case follow-up information is needed.]	LHD program contact name: <u>Debra Biddy</u> Phone and email address: <u>980-484-5337/Debra.Biddy@clevelandcountync.gov</u>
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Signature on this page signifies you have read and accepted all pages of this document.

Template rev. Dec2024

FY26 - FAS Activity Nbr + Name: **465 WISEWOMAN**federal award
supplement

FAS Number + Reason:

3

This FAS is accompanying an AA+BE or an AA Revision+BE Revision.

Assistance Listing Nbr + Name: **93.436 WELL-INTEGRATED SCREENING AND EVALUATION FOR WOMEN ACROSS THE NATION**Is award R&D?: **NO**FAIN: **NU58DP007662**IDC rate: **10.00%**Fed awd total amt: \$ **900,000**

North Carolina WELL-INTEGRATED SCREENING AND EVALUATION FOR WOMEN ACROSS THE NATION

Fed award project description: **(WISEWOMAN)Program HHS, Centers for Disease**Fed awd date + awarding agency: **09-24-25 HHS, Centers for Disease Control and Prevention**

Subrecipient	Subrecipient's UEI	Federal funds from grant listed above	Total federal funds for entire Activity	Subrecipient	Subrecipient's UEI	Federal funds from grant listed above	Total federal funds for entire Activity
Alamance	F5VHYUU13NC5			Jackson	X7YWWY6ZP574	\$ 230	\$ 5,455
Albemarle	WAAVS51PNMK3	\$ 300	\$ 6,850	Johnston	SYGAGEFDHYR7	\$ 900	\$ 19,375
Alexander	XVEEJSNY7UX9			Jones	HE3NNNUE27M7	\$ 230	\$ 5,455
Anson	PK8UYTSNJCC3			Lee	F6A8UC99JWJ5	\$ 170	\$ 4,070
Appalachian	CD7BFHB8W539			Lenoir	QKUFLL37VPGH6		
Beaufort	RN1SXF04LXN6			Lincoln	UGGQSSSKBGJ5		
Bladen	TLCTJWDJH1H9			Macon	LLPJBC6N2LL3	\$ 300	\$ 6,835
Brunswick	MJBMXLN9NJT5			Madison	YQ96F8BJYTJ9	\$ 250	\$ 5,520
Buncombe	W5TCDKMLHE69	\$ (65,455)	\$ 32,735	MTW	ZKK5GNNRNBYY6	\$ 230	\$ 5,455
Burke	KVJHUFURQDM5			Mecklenburg	EZ15XL6BMM68		
Cabarrus	RXDXNEJKJFU7			Montgomery	E78ZAJM3BFL3		
Caldwell	HL4FGNJNGE97			Moore	HFNSK95FS7Z8		
Carteret	UC6WJ2MQMJS8			Nash	NF58K566HQM7		
Caswell	JDJ7Y7CGYC86			New Hanover	F7TLT2GMEJE1	\$ (3,400)	\$ 1,825
Catawba	GYUNA9W1NFM1			Northampton	CRA2KCAL8BA4		
Chatham	KE57QE2GV5F1			Onslow	EGE7NBXW5JS6		
Cherokee	DCEGK6HA11M5			Orange	GFFMCW9XDA53		
Clay	HYKLQVNLXK7			Pamlico	FT\$9QFEAU344		
Cleveland	UWMUYMPVL483	\$ 400	\$ 10,700	Pender	T11BE678U9P5		
Columbus	V1UAJ4L87WQ7			Person	FQ8LFJGMABJ4		
Craven	LTZ2U8LZQ214			Pitt	VZNPMLFTSR6		
Cumberland	HALND8WJ3GN4			Polk	QZ6BZPGLX4Y9		
Dare	ELV6JGB11QK6			Randolph	T3BUM1CVS9N5		
Davidson	C9P5MDJC7KY7			Richmond	Q63FZNTJM3M4		
Davie	L8WBGLHZV239			Robeson	LKBEJQFLAAK5		
Duplin	KZN4GK5262K3	\$ (3,400)	\$ 1,825	Rockingham	KGCCCHJJZZ43		
Durham	LJ5BA6U2HLM7			Rowan	GCB7UCV96NW6		
Edgecombe	MAN4LX44AD17			Sampson	WRT9CSK1KJY5		
Foothills	NGTEF2MQ8LL4			Scotland	FNVTUQUGCHM5		
Forsyth	V6BGVQ67YPY5			Stanly	U86MZUYPL7C5		
Franklin	FFKTRQCNN143			Stokes	W41TRA3NUNS1		
Gaston	QKY9R8A8DSJ6			Surry	FMWCTM24C9J8	\$ 330	\$ 8,130
Graham	L8MAVKQJTYN7			Swain	TAE3M92L4QR4		
Granv-Vance	MGQJKK22EJB3			Toe River	JUA6GAUQ9UM1		
Greene	VCUSLD71N9U3			Transylvania	YLN4BFCJCP39		
Guilford	YBEQNGFJPMJ3			Union	LHMKBD4AGRJ5		
Halifax	MRL8MYNJ3Y5			Wake	FTJ2WJPLWMJ3	\$ 930	\$ 20,655
Harnett	JBDCD9V41BX7			Warren	TLNAU5CNHSU5		
Haywood	DQHZEVAV95G5			Wayne	DACFHCLQKMS1		
Henderson	TG5AR81JLFQ5			Wilkes	M14KKHY2NNR3		
Hoke	C1GWSADARX51			Wilson	ME2DJHMYWG55		
Hyde	T2RSYN36NN64			Yadkin	PLCDT7JFA8B1		
Iredell	XTNRLKJLA4S9			Yancey	L98MCUHKC2J8		

UEI = Unique Entity Identifier

Federal Award Reporting Requirements for Pass-Through Agencies, 2 CFR § 200.331

DPH v1 05-30-24 [ag]

DPH-Aid-To-Counties

For Fiscal Year: 25/26

Budgetary Estimate Number : 1

Activity 465	AA	133202 2B03720 20G0111001	Total Allocated	133202 2B03720 20G0111001	Total Allocated	133202 2B03720 20G0111001	Total Allocated	133202 2B03720 20G0111001	Total Allocated	Proposed Total	New Total
Service Period		06/01-09/30		10/01-05/31		06/02-09/30		10/02-05/31			
Payment Period		07/01-10/30		11/01-06/30		07/02-10/30		11/02-06/30			
01 Alamance		0	\$0.00	0	\$0.00	0	\$0.00	0	\$0.00	0	0
D1 Albemarle	* 1	0	\$2,000.00	170	\$4,250.00	0	\$105.00	130	\$195.00	300	6,850
02 Alexander		0	\$0.00	0	\$0.00	0	\$0.00	0	\$0.00	0	0
04 Anson		0	\$0.00	0	\$0.00	0	\$0.00	0	\$0.00	0	0
D2 Appalachian		0	\$0.00	0	\$0.00	0	\$0.00	0	\$0.00	0	0
07 Beaufort		0	\$0.00	0	\$0.00	0	\$0.00	0	\$0.00	0	0
09 Bladen		0	\$0.00	0	\$0.00	0	\$0.00	0	\$0.00	0	0
10 Brunswick		0	\$0.00	0	\$0.00	0	\$0.00	0	\$0.00	0	0
11 Buncombe		0	\$31,250.00	-62,500	\$62,500.00	0	\$1,485.00	-2,955	\$2,955.00	-65,455	32,735
12 Burke		0	\$0.00	0	\$0.00	0	\$0.00	0	\$0.00	0	0
13 Cabarrus		0	\$0.00	0	\$0.00	0	\$0.00	0	\$0.00	0	0
14 Caldwell		0	\$0.00	0	\$0.00	0	\$0.00	0	\$0.00	0	0
16 Carteret		0	\$0.00	0	\$0.00	0	\$0.00	0	\$0.00	0	0
17 Caswell		0	\$0.00	0	\$0.00	0	\$0.00	0	\$0.00	0	0
18 Catawba		0	\$0.00	0	\$0.00	0	\$0.00	0	\$0.00	0	0
19 Chatham		0	\$0.00	0	\$0.00	0	\$0.00	0	\$0.00	0	0
20 Cherokee		0	\$0.00	0	\$0.00	0	\$0.00	0	\$0.00	0	0
22 Clay		0	\$0.00	0	\$0.00	0	\$0.00	0	\$0.00	0	0
23 Cleveland	* 1	0	\$3,250.00	270	\$6,750.00	0	\$105.00	130	\$195.00	400	10,700
24 Columbus		0	\$0.00	0	\$0.00	0	\$0.00	0	\$0.00	0	0
25 Craven		0	\$0.00	0	\$0.00	0	\$0.00	0	\$0.00	0	0
26 Cumberland		0	\$0.00	0	\$0.00	0	\$0.00	0	\$0.00	0	0
28 Dare		0	\$0.00	0	\$0.00	0	\$0.00	0	\$0.00	0	0
29 Davidson		0	\$0.00	0	\$0.00	0	\$0.00	0	\$0.00	0	0
30 Davie		0	\$0.00	0	\$0.00	0	\$0.00	0	\$0.00	0	0
31 Duplin		0	\$1,750.00	-3,250	\$3,250.00	0	\$75.00	-150	\$150.00	-3,400	1,825
32 Durham		0	\$0.00	0	\$0.00	0	\$0.00	0	\$0.00	0	0
33 Edgecombe		0	\$0.00	0	\$0.00	0	\$0.00	0	\$0.00	0	0
D7 Foothills		0	\$0.00	0	\$0.00	0	\$0.00	0	\$0.00	0	0
34 Forsyth		0	\$0.00	0	\$0.00	0	\$0.00	0	\$0.00	0	0
35 Franklin		0	\$0.00	0	\$0.00	0	\$0.00	0	\$0.00	0	0
36 Gaston		0	\$0.00	0	\$0.00	0	\$0.00	0	\$0.00	0	0
38 Graham		0	\$0.00	0	\$0.00	0	\$0.00	0	\$0.00	0	0
D3 Gran-Vance		0	\$0.00	0	\$0.00	0	\$0.00	0	\$0.00	0	0
40 Greene		0	\$0.00	0	\$0.00	0	\$0.00	0	\$0.00	0	0
41 Guilford		0	\$0.00	0	\$0.00	0	\$0.00	0	\$0.00	0	0
42 Halifax		0	\$0.00	0	\$0.00	0	\$0.00	0	\$0.00	0	0
43 Harnett		0	\$0.00	0	\$0.00	0	\$0.00	0	\$0.00	0	0
44 Haywood		0	\$0.00	0	\$0.00	0	\$0.00	0	\$0.00	0	0
45 Henderson		0	\$0.00	0	\$0.00	0	\$0.00	0	\$0.00	0	0
47 Hoke		0	\$0.00	0	\$0.00	0	\$0.00	0	\$0.00	0	0
48 Hyde		0	\$0.00	0	\$0.00	0	\$0.00	0	\$0.00	0	0
49 Iredell		0	\$0.00	0	\$0.00	0	\$0.00	0	\$0.00	0	0
50 Jackson	* 1	0	\$1,750.00	130	\$3,250.00	0	\$75.00	100	\$150.00	230	5,455
51 Johnston	* 1	0	\$8,750.00	470	\$11,750.00	0	\$330.00	430	\$645.00	900	19,375
52 Jones	* 1	0	\$1,750.00	130	\$3,250.00	0	\$75.00	100	\$150.00	230	5,455
53 Lee	* 1	0	\$1,250.00	100	\$2,500.00	0	\$45.00	70	\$105.00	170	4,070
54 Lenoir		0	\$0.00	0	\$0.00	0	\$0.00	0	\$0.00	0	0
55 Lincoln		0	\$0.00	0	\$0.00	0	\$0.00	0	\$0.00	0	0
56 Macon	* 1	0	\$2,000.00	170	\$4,250.00	0	\$90.00	130	\$195.00	300	6,835

COUNTY OF CLEVELAND, NORTH CAROLINA

AGENDA ITEM SUMMARY

Health Department: Budget Amendment (BNA#041)

Department: Health Department

Agenda Title: Budget Amendment (BNA#041)

Agenda Summary:

Proposed Action:

ATTACHMENTS:

File Name		Description
<input type="checkbox"/>	Health_BNA_041_budget_drug_rebate_funds_to_offset_cost__of_tier_3-5.pdf	BNA 041

CLE*SUPERVISOR.MTH.END.REPORT

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CLEVELAND COUNTY
Expenditures By Department
Report dates 07/01/2025 - thru - 01/31/2026...

Account Number	Account Description	Budget Adjusted 01/31/2026	Debits 01/01/2026 01/31/2026	Credits 01/01/2026 01/31/2026	Year to Date 07/01/2025 01/31/2026	Encumbered & Requested As of 01/31/2026	Budget Available 01/31/2026	Percent Remain
012-550-4-310-00	FED GOVT GRANTS-	0.00	0.00	0.00	0.00	0.00	0.00	0.00
012-550-4-410-00	LOCAL & OTHER GR	0.00	0.00	0.00	0.00	0.00	0.00	0.00
012-550-4-465-00	ADMIN SERVICES A	109,772.40	0.00	0.00	0.00	0.00	109,772.40	100.00
012-550-4-510-00	DEPARTMENTAL FEE	10,000.00	0.00	0.00	-4,037.60	0.00	5,962.40	59.62
012-550-4-510-66	DEPARTMENTAL FEE	20,000.00	0.00	0.00	-11,260.87	0.00	8,739.13	43.70
012-550-4-510-67	PHARMACY FEES-PR	15,000.00	0.00	0.00	-6,659.72	0.00	8,340.28	55.60 + 1340
012-550-4-510-68	PHARMACY FEES-PR	20,000.00	0.00	0.00	-10,612.07	0.00	9,387.93	46.94
012-550-4-510-69	DEPARTMENTAL FEE	6,200.00	0.00	0.00	-2,643.32	0.00	3,556.68	57.37
012-550-4-510-70	Pharmacy Fees-Be	5,000.00	0.00	0.00	0.00	0.00	5,000.00	100.00
012-550-4-610-00	INSURANCE FEES-P	0.00	0.00	0.00	-135.83	0.00	-135.83	0.00
012-550-4-610-66	INSURANCE FEES-P	30,000.00	0.00	0.00	-14,481.74	0.00	15,518.26	51.73
012-550-4-610-67	PCY INSURANCE P	0.00	0.00	0.00	-251.16	0.00	-251.16	0.00
012-550-4-610-68	PCY INSURANCE P	0.00	0.00	0.00	0.00	0.00	0.00	0.00
012-550-4-610-69	INSURANCE FEES-B	0.00	0.00	0.00	-1,899.19	0.00	-1,899.19	0.00
012-550-4-650-00	MEDICARE-PRIMARY	1,000.00	0.00	0.00	25.00	0.00	1,025.00	102.50
012-550-4-650-66	MEDICARE-PRIMARY	10,000.00	0.00	0.00	-425.78	0.00	9,574.22	95.74
012-550-4-650-67	PCY MEDICARE-PR	0.00	0.00	0.00	0.00	0.00	0.00	0.00
012-550-4-650-68	PCY MEDICARE-PR	0.00	0.00	0.00	0.00	0.00	0.00	0.00
012-550-4-660-00	MEDICAID-PRIMARY	0.00	0.00	0.00	0.00	0.00	0.00	0.00
012-550-4-660-66	MEDICAID-PRIMARY	80,000.00	0.00	0.00	-66,101.02	0.00	13,898.98	17.37
012-550-4-660-67	PCY MEDICAID-PR	1,200.00	0.00	0.00	-31.77	0.00	1,168.23	97.35
012-550-4-660-68	PCY MEDICAID-PR	20,000.00	0.00	0.00	-29,540.63	0.00	-9,540.63	-47.70
012-550-4-660-69	MEDICAID-BEHAVIO	10,000.00	0.00	0.00	-5,396.24	0.00	4,603.76	46.04
012-550-4-660-99	MEDICAID-PRIOR Y	100,000.00	0.00	0.00	0.00	0.00	100,000.00	100.00
012-550-4-990-01	BUD ACC ONLY-OTH	0.00	0.00	0.00	0.00	0.00	0.00	0.00
012-550-4-991-00	FUND BALANCE APP	173,968.00	0.00	0.00	0.00	0.00	173,968.00	100.00
PRIMARY CARE		612,140.40	0.00	0.00	-153,451.94	0.00	458,688.46	74.93
012-550-5-121-00	SALARIES/WAGES-R	205,113.00	0.00	0.00	104,872.27	0.00	100,240.73	48.87
012-550-5-131-00	SOCIAL SECURITY	12,717.10	0.00	0.00	6,385.30	0.00	6,331.80	49.79
012-550-5-132-00	RETIREMENT	27,894.90	0.00	0.00	14,721.09	0.00	13,173.81	47.23
012-550-5-133-00	HOSPITAL INSURAN	39,600.00	0.00	0.00	16,500.00	0.00	23,100.00	58.33
012-550-5-134-00	DENTAL INSURANCE	540.00	0.00	0.00	225.00	0.00	315.00	58.33
012-550-5-135-00	EMPLOYER 401K	11,833.00	0.00	0.00	6,142.26	0.00	5,690.74	48.09
012-550-5-136-00	MEDICARE TAXES	2,974.40	0.00	0.00	1,493.36	0.00	1,481.04	49.79
012-550-5-210-00	DEPARTMENTAL SUP	6,000.00	0.00	0.00	1,598.79	0.00	4,401.21	73.35
012-550-5-211-00	CONTROLLED PROPE	0.00	0.00	0.00	0.00	0.00	0.00	0.00
012-550-5-230-00	MEDICINE & SUPPL	5,000.00	0.00	0.00	1,253.92	0.00	3,746.08	74.92
012-550-5-230-01	PRESCRIPTION DRU	165,000.00	0.00	0.00	133,970.43	0.00	31,029.57	18.81 + 1340
012-550-5-230-05	LAB SUPPLIES	51,984.00	0.00	0.00	11,791.34	0.00	40,192.66	77.32

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550.4.510.67 + 134,012
550.5.230.01 + 134,012

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CLEVELAND COUNTY
Expenditures By Department
Report dates 07/01/2025 - thru - 01/31/2026

Account Number	Account Description	Budget Adjusted 01/31/2026	Debits 01/01/2026 01/31/2026	Credits 01/01/2026 01/31/2026	Year to Date 07/01/2025 01/31/2026	Encumbered & Requested As of 01/31/2026	Budget Available 01/31/2026	Percent Remain
013-660-4-465-00	ADMIN SERVICES A	0.00	0.00	0.00	0.00	0.00	0.00	0.00
013-660-4-510-00	DEPARTMENTAL FEE	4,000.00	0.00	0.00	-1,548.00	0.00	2,452.00	61.30
013-660-4-510-65	WELLNESS CLINICI	15,000.00	0.00	0.00	-5,164.00	0.00	9,836.00	65.57
013-660-4-510-70	WELLNESS TIER-1	110,000.00	0.00	0.00	-49,899.79	0.00	60,100.21	54.64
013-660-4-510-72	WELLNESS TIER-2	0.00	0.00	0.00	0.00	0.00	0.00	0.00
013-660-4-510-73	WELLNESS TIER-3	0.00	0.00	0.00	0.00	0.00	0.00	0.00
013-660-4-510-77	WELLNESS TIER 4-	0.00	0.00	0.00	0.00	0.00	0.00	0.00
013-660-4-510-78	WELLNESS TIER 5-	50,000.00	0.00	0.00	-384,012.50	0.00	-334,012.50	-668.03+200.00
013-660-4-610-70	INSURANCES FEES-	0.00	0.00	0.00	0.00	0.00	0.00	0.00
013-660-4-660-12	MEDICAID-PHARMAC	0.00	0.00	0.00	-219.92	0.00	-219.92	0.00
013-660-4-800-00	MISCELLANEOUS RE	0.00	0.00	0.00	0.00	0.00	0.00	0.00
013-660-4-821-00	COLLECTION NSF C	0.00	0.00	0.00	0.00	0.00	0.00	0.00
013-660-4-830-01	PAYMENT OVERS/SH	0.00	0.00	0.00	0.00	0.00	0.00	0.00
013-660-4-980-10	CONTRIBUTIONS FR	0.00	0.00	0.00	0.00	0.00	0.00	0.00
013-660-4-980-65	TRANSFERS FM HRA	2,358,831.82	0.00	0.00	0.00	0.00	2,358,831.82	100.00
013-660-4-991-00	FUND BALANCE APP	0.00	0.00	0.00	0.00	0.00	0.00	0.00
EMPLOYEE WELLNESS CENTER		2,537,831.82	0.00	0.00	-440,844.21	0.00	2,096,987.61	82.63
013-660-5-121-00	SALARIES/WAGES-R	660,429.00	0.00	0.00	313,789.27	0.00	346,639.73	52.49
013-660-5-122-00	SALARIES/WAGES-P	0.00	0.00	0.00	0.00	0.00	0.00	0.00
013-660-5-131-00	SOCIAL SECURITY	40,946.90	0.00	0.00	18,697.23	0.00	22,249.67	54.34
013-660-5-132-00	RETIREMENT	89,818.60	0.00	0.00	44,619.60	0.00	45,199.00	50.32
013-660-5-133-00	HOSPITAL INSURAN	79,200.00	0.00	0.00	33,000.00	0.00	46,200.00	58.33
013-660-5-134-00	DENTAL INSURANCE	1,080.00	0.00	0.00	540.00	0.00	540.00	50.00
013-660-5-135-00	EMPLOYER 401K	38,102.00	0.00	0.00	18,617.36	0.00	19,484.64	51.14
013-660-5-136-00	MEDICARE TAXES	9,576.32	0.00	0.00	4,372.65	0.00	5,203.67	54.34
013-660-5-210-00	DEPARTMENTAL SUP	5,000.00	0.00	0.00	1,006.58	0.00	3,993.42	79.87
013-660-5-211-00	CONTROLLED PROPE	0.00	0.00	0.00	0.00	0.00	0.00	0.00
013-660-5-211-01	CONTROL EQ-MAJOR	0.00	0.00	0.00	0.00	0.00	0.00	0.00
013-660-5-230-00	MEDICINE & SUPPL	5,000.00	0.00	0.00	4,641.79	0.00	358.21	7.16
013-660-5-230-01	PRESCRIPTION DRU	1,500,000.00	87,374.28	4,104.96	977,845.75	111,252.79	410,901.46	27.39+200.01
013-660-5-230-03	TIER-2 PRESCRIPT	0.00	0.00	0.00	0.00	0.00	0.00	0.00
013-660-5-230-04	TIER-3 PRESCRIPT	0.00	0.00	0.00	0.00	0.00	0.00	0.00
013-660-5-230-05	LAB SUPPLIES	3,500.00	0.00	0.00	320.68	0.00	3,179.32	90.84
013-660-5-230-06	TIER-4 PRESCRIPT	0.00	0.00	0.00	0.00	0.00	0.00	0.00
013-660-5-230-07	TIER-5 PRESCRIPT	0.00	0.00	0.00	0.00	0.00	0.00	0.00
013-660-5-231-00	PHARMACY FEES	40,000.00	0.00	0.00	30,248.48	0.00	9,751.52	24.38
013-660-5-310-00	TRAVEL/TRAINING	3,000.00	0.00	0.00	199.00	0.00	2,801.00	93.37
013-660-5-311-00	EDUCATION/CERTIF	0.00	0.00	0.00	0.00	0.00	0.00	0.00
013-660-5-321-00	TELECOMMUNICATIO	2,500.00	0.00	0.00	1,412.94	900.00	187.06	7.48

BA
13.660.4. 510.78
13.660.5. 230.01

+ 200,000
+ 200,000

CLEVELAND COUNTY

Expenditures By Department

Report dates 07/01/2025 - thru - 01/31/2026

Account Number	Account Description	Budget Adjusted	Debits	Credits	Year to Date	Encumbered & Requested	Budget Available	Percent Remain
		01/31/2026	01/01/2026 01/31/2026	01/01/2026 01/31/2026	07/01/2025 01/31/2026	As of 01/31/2026	01/31/2026	
013-660-5-322-00	POSTAGE	100.00	0.00	0.00	9.14	0.00	90.86	90.86
013-660-5-330-00	UTILITIES	6,000.00	0.00	0.00	2,000.00	0.00	4,000.00	66.67
013-660-5-340-00	MAINT BLDG/GROUN	0.00	0.00	0.00	0.00	0.00	0.00	0.00
013-660-5-370-00	ADVERTISING/PROM	1,000.00	0.00	0.00	168.64	0.00	831.36	83.14
013-660-5-410-00	RENTAL/LEASE EQU	0.00	0.00	0.00	0.00	0.00	0.00	0.00
013-660-5-420-00	CONTRACTED SERVI	40,000.00	0.00	0.00	20,147.75	17,072.28	2,779.97	6.95
013-660-5-421-00	MAINT CONTRACTS-	1,079.00	0.00	0.00	287.02	668.20	123.78	11.47
013-660-5-422-00	CONTRACTED LABOR	0.00	0.00	0.00	0.00	0.00	0.00	0.00
013-660-5-430-00	INSURANCE /BONDI	3,000.00	0.00	0.00	3,000.00	0.00	0.00	0.00
013-660-5-460-00	DUES/SUBSCRIPTIO	0.00	0.00	0.00	0.00	0.00	0.00	0.00
013-660-5-461-00	LICENSE/PERMIT/C	0.00	0.00	0.00	0.00	0.00	0.00	0.00
013-660-5-490-00	PROFESSIONAL SER	0.00	0.00	0.00	0.00	0.00	0.00	0.00
013-660-5-513-00	HOSPITAL/DOCTOR	8,000.00	0.00	0.00	1,500.00	3,500.00	3,000.00	37.50
013-660-5-560-00	REFUNDS	0.00	0.00	0.00	0.00	0.00	0.00	0.00
013-660-5-581-00	AWARDS/APPRECIAT	500.00	0.00	0.00	0.00	0.00	500.00	100.00
013-660-5-910-00	CAPITAL EQUIPMEN	0.00	0.00	0.00	0.00	0.00	0.00	0.00
EMPLOYEE WELLNESS CENTER		2,537,831.82	87,374.28	4,104.96	1,476,423.88	133,393.27	928,014.67	36.57
Total EMPLOYEE WELLNESS CENTER		0.00	87,374.28	4,104.96	1,035,579.67	133,393.27	1,168,972.94	59.60

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CLEVELAND COUNTY
Expenditures By Department
Report dates 07/01/2025 - thru - 01/31/2026

Account Number	Account Description	Budget Adjusted 01/31/2026	Debits 01/01/2026 01/31/2026	Credits 01/01/2026 01/31/2026	Year to Date 07/01/2025 01/31/2026	Encumbered & Requested As of 01/31/2026	Budget Available 01/31/2026	Percent Remain
012-550-4-310-00	FED GOVT GRANTS-	0.00	0.00	0.00	0.00	0.00	0.00	0.00
012-550-4-410-00	LOCAL & OTHER GR	0.00	0.00	0.00	0.00	0.00	0.00	0.00
012-550-4-465-00	ADMIN SERVICES A	109,772.40	0.00	0.00	0.00	0.00	109,772.40	100.00
012-550-4-510-00	DEPARTMENTAL FEE	10,000.00	0.00	0.00	-4,037.60	0.00	5,962.40	59.62
012-550-4-510-66	DEPARTMENTAL FEE	20,000.00	0.00	0.00	-11,260.87	0.00	8,739.13	43.70
012-550-4-510-67	PHARMACY FEES-PR	15,000.00	0.00	0.00	-6,659.72	0.00	8,340.28	55.60 +1340
012-550-4-510-68	PHARMACY FEES-PR	20,000.00	0.00	0.00	-10,612.07	0.00	9,387.93	46.94
012-550-4-510-69	DEPARTMENTAL FEE	6,200.00	0.00	0.00	-2,643.32	0.00	3,556.68	57.37
012-550-4-510-70	Pharmacy Fees-Be	5,000.00	0.00	0.00	0.00	0.00	5,000.00	100.00
012-550-4-610-00	INSURANCE FEES-P	0.00	0.00	0.00	-135.83	0.00	-135.83	0.00
012-550-4-610-66	INSURANCE FEES-P	30,000.00	0.00	0.00	-14,481.74	0.00	15,518.26	51.73
012-550-4-610-67	PCY INSURANCE F	0.00	0.00	0.00	-251.16	0.00	-251.16	0.00
012-550-4-610-68	PCY INSURANCE F	0.00	0.00	0.00	0.00	0.00	0.00	0.00
012-550-4-610-69	INSURANCE FEES-B	0.00	0.00	0.00	-1,899.19	0.00	-1,899.19	0.00
012-550-4-650-00	MEDICARE-PRIMARY	1,000.00	0.00	0.00	25.00	0.00	1,025.00	102.50
012-550-4-650-66	MEDICARE-PRIMARY	10,000.00	0.00	0.00	-425.78	0.00	9,574.22	95.74
012-550-4-650-67	PCY MEDICARE-PR	0.00	0.00	0.00	0.00	0.00	0.00	0.00
012-550-4-650-68	PCY MEDICARE-PR	0.00	0.00	0.00	0.00	0.00	0.00	0.00
012-550-4-660-00	MEDICAID-PRIMARY	0.00	0.00	0.00	0.00	0.00	0.00	0.00
012-550-4-660-66	MEDICAID-PRIMARY	80,000.00	0.00	0.00	-66,101.02	0.00	13,898.98	17.37
012-550-4-660-67	PCY MEDICAID-PR	1,200.00	0.00	0.00	-31.77	0.00	1,168.23	97.35
012-550-4-660-68	PCY MEDICAID-PR	20,000.00	0.00	0.00	-29,540.63	0.00	-9,540.63	-47.70
012-550-4-660-69	MEDICAID-BEHAVIO	10,000.00	0.00	0.00	-5,396.24	0.00	4,603.76	46.04
012-550-4-660-99	MEDICAID-PRIOR Y	100,000.00	0.00	0.00	0.00	0.00	100,000.00	100.00
012-550-4-990-01	BUD ACC ONLY-OTH	0.00	0.00	0.00	0.00	0.00	0.00	0.00
012-550-4-991-00	FUND BALANCE APP	173,968.00	0.00	0.00	0.00	0.00	173,968.00	100.00
PRIMARY CARE		612,140.40	0.00	0.00	-153,451.94	0.00	458,688.46	74.93
012-550-5-121-00	SALARIES/WAGES-R	205,113.00	0.00	0.00	104,872.27	0.00	100,240.73	48.87
012-550-5-131-00	SOCIAL SECURITY	12,717.10	0.00	0.00	6,385.30	0.00	6,331.80	49.79
012-550-5-132-00	RETIREMENT	27,894.90	0.00	0.00	14,721.09	0.00	13,173.81	47.23
012-550-5-133-00	HOSPITAL INSURAN	39,600.00	0.00	0.00	16,500.00	0.00	23,100.00	58.33
012-550-5-134-00	DENTAL INSURANCE	540.00	0.00	0.00	225.00	0.00	315.00	58.33
012-550-5-135-00	EMPLOYER 401K	11,833.00	0.00	0.00	6,142.26	0.00	5,690.74	48.09
012-550-5-136-00	MEDICARE TAXES	2,974.40	0.00	0.00	1,493.36	0.00	1,481.04	49.79
012-550-5-210-00	DEPARTMENTAL SUP	6,000.00	0.00	0.00	1,598.79	0.00	4,401.21	73.35
012-550-5-211-00	CONTROLLED PROPE	0.00	0.00	0.00	0.00	0.00	0.00	0.00
012-550-5-230-00	MEDICINE & SUPPL	5,000.00	0.00	0.00	1,253.92	0.00	3,746.08	74.92
012-550-5-230-01	PRESCRIPTION DRU	165,000.00	0.00	0.00	133,970.43	0.00	31,029.57	18.81 +1340
012-550-5-230-05	LAB SUPPLIES	51,984.00	0.00	0.00	11,791.34	0.00	40,192.66	77.32

BA

550.4.510.67

+ 134,012

550.5.230.01

+ 134,012

CLE*SUPERVISOR.MTH.END.REPORT

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CLEVELAND COUNTY
Expenditures By Department
Report dates 07/01/2025 - thru - 01/31/2026

Account Number	Account Description	Budget Adjusted 01/31/2026	Debits 01/01/2026 01/31/2026	Credits 01/01/2026 01/31/2026	Year to Date 07/01/2025 01/31/2026	Encumbered & Requested As of 01/31/2026	Budget Available 01/31/2026	Percent Remain
013-660-4-465-00	ADMIN SERVICES A	0.00	0.00	0.00	0.00	0.00	0.00	0.00
013-660-4-510-00	DEPARTMENTAL FEE	4,000.00	0.00	0.00	-1,548.00	0.00	2,452.00	61.30
013-660-4-510-65	WELLNESS CLINICI	15,000.00	0.00	0.00	-5,164.00	0.00	9,836.00	65.57
013-660-4-510-70	WELLNESS TIER-1	110,000.00	0.00	0.00	-49,899.79	0.00	60,100.21	54.64
013-660-4-510-72	WELLNESS TIER-2	0.00	0.00	0.00	0.00	0.00	0.00	0.00
013-660-4-510-73	WELLNESS TIER-3	0.00	0.00	0.00	0.00	0.00	0.00	0.00
013-660-4-510-77	WELLNESS TIER 4-	0.00	0.00	0.00	0.00	0.00	0.00	0.00
013-660-4-510-78	WELLNESS TIER 5-	50,000.00	0.00	0.00	-384,012.50	0.00	-334,012.50	-668.03 + 200.00
013-660-4-610-70	INSURANCES FEES-	0.00	0.00	0.00	0.00	0.00	0.00	0.00
013-660-4-660-12	MEDICAID-PHARMAC	0.00	0.00	0.00	-219.92	0.00	-219.92	0.00
013-660-4-800-00	MISCELLANEOUS RE	0.00	0.00	0.00	0.00	0.00	0.00	0.00
013-660-4-821-00	COLLECTION NSF C	0.00	0.00	0.00	0.00	0.00	0.00	0.00
013-660-4-830-01	PAYMENT OVERS/SH	0.00	0.00	0.00	0.00	0.00	0.00	0.00
013-660-4-980-10	CONTRIBUTIONS FR	0.00	0.00	0.00	0.00	0.00	0.00	0.00
013-660-4-980-65	TRANSFERS FM HEA	2,358,831.82	0.00	0.00	0.00	0.00	2,358,831.82	100.00
013-660-4-991-00	FUND BALANCE APP	0.00	0.00	0.00	0.00	0.00	0.00	0.00
EMPLOYEE WELLNESS CENTER		2,537,831.82	0.00	0.00	-440,844.21	0.00	2,096,987.61	82.63
013-660-5-121-00	SALARIES/WAGES-R	660,429.00	0.00	0.00	313,789.27	0.00	346,639.73	52.49
013-660-5-122-00	SALARIES/WAGES-P	0.00	0.00	0.00	0.00	0.00	0.00	0.00
013-660-5-131-00	SOCIAL SECURITY	40,946.90	0.00	0.00	18,697.23	0.00	22,249.67	54.34
013-660-5-132-00	RETIREMENT	89,818.60	0.00	0.00	44,619.60	0.00	45,199.00	50.32
013-660-5-133-00	HOSPITAL INSURAN	79,200.00	0.00	0.00	33,000.00	0.00	46,200.00	58.33
013-660-5-134-00	DENTAL INSURANCE	1,080.00	0.00	0.00	540.00	0.00	540.00	50.00
013-660-5-135-00	EMPLOYER 401K	38,102.00	0.00	0.00	18,617.36	0.00	19,484.64	51.14
013-660-5-136-00	MEDICARE TAXES	9,576.32	0.00	0.00	4,372.65	0.00	5,203.67	54.34
013-660-5-210-00	DEPARTMENTAL SUP	5,000.00	0.00	0.00	1,006.58	0.00	3,993.42	79.87
013-660-5-211-00	CONTROLLED PROPE	0.00	0.00	0.00	0.00	0.00	0.00	0.00
013-660-5-211-01	CONTROL EQ-MAJOR	0.00	0.00	0.00	0.00	0.00	0.00	0.00
013-660-5-230-00	MEDICINE & SUPPL	5,000.00	0.00	0.00	4,641.79	0.00	358.21	7.16
013-660-5-230-01	PRESCRIPTION DRU	1,500,000.00	87,374.28	4,104.96	977,845.75	111,252.79	410,901.46	27.39 + 200.00
013-660-5-230-03	TIER-2 PRESCRIPT	0.00	0.00	0.00	0.00	0.00	0.00	0.00
013-660-5-230-04	TIER-3 PRESCRIPT	0.00	0.00	0.00	0.00	0.00	0.00	0.00
013-660-5-230-05	LAB SUPPLIES	3,500.00	0.00	0.00	320.68	0.00	3,179.32	90.84
013-660-5-230-06	TIER-4 PRESCRIPT	0.00	0.00	0.00	0.00	0.00	0.00	0.00
013-660-5-230-07	TIER-5 PRESCRIPT	0.00	0.00	0.00	0.00	0.00	0.00	0.00
013-660-5-231-00	PHARMACY FEES	40,000.00	0.00	0.00	30,248.48	0.00	9,751.52	24.38
013-660-5-310-00	TRAVEL/TRAINING	3,000.00	0.00	0.00	199.00	0.00	2,801.00	93.37
013-660-5-311-00	EDUCATION/CERTIF	0.00	0.00	0.00	0.00	0.00	0.00	0.00
013-660-5-321-00	TELECOMMUNICATIO	2,500.00	0.00	0.00	1,412.94	900.00	187.06	7.48

BA

13.660.4. 510.78

+ 200,000

13.660.5. 230.01

+ 200,000

Account Number	Account Description	Budget Adjusted	Debits	Credits	Year to Date	Encumbered & Requested	Budget Available	Percent Remain
		01/31/2026	01/01/2026 01/31/2026	01/01/2026 01/31/2026	07/01/2025 01/31/2026	As of 01/31/2026	01/31/2026	
013-660-5-322-00	POSTAGE	100.00	0.00	0.00	9.14	0.00	90.86	90.86
013-660-5-330-00	UTILITIES	6,000.00	0.00	0.00	2,000.00	0.00	4,000.00	66.67
013-660-5-340-00	MAINT BLDG/GROUN	0.00	0.00	0.00	0.00	0.00	0.00	0.00
013-660-5-370-00	ADVERTISING/PROM	1,000.00	0.00	0.00	168.64	0.00	831.36	83.14
013-660-5-410-00	RENTAL/LEASE EQU	0.00	0.00	0.00	0.00	0.00	0.00	0.00
013-660-5-420-00	CONTRACTED SERVI	40,000.00	0.00	0.00	20,147.75	17,072.28	2,779.97	6.95
013-660-5-421-00	MAINT CONTRACTS-	1,079.00	0.00	0.00	287.02	668.20	123.78	11.47
013-660-5-422-00	CONTRACTED LABOR	0.00	0.00	0.00	0.00	0.00	0.00	0.00
013-660-5-430-00	INSURANCE /BONDI	3,000.00	0.00	0.00	3,000.00	0.00	0.00	0.00
013-660-5-460-00	DUES/SUBSCRIPTIO	0.00	0.00	0.00	0.00	0.00	0.00	0.00
013-660-5-461-00	LICENSE/PERMIT/C	0.00	0.00	0.00	0.00	0.00	0.00	0.00
013-660-5-490-00	PROFESSIONAL SER	0.00	0.00	0.00	0.00	0.00	0.00	0.00
013-660-5-513-00	HOSPITAL/DOCTOR	8,000.00	0.00	0.00	1,500.00	3,500.00	3,000.00	37.50
013-660-5-560-00	REFUNDS	0.00	0.00	0.00	0.00	0.00	0.00	0.00
013-660-5-581-00	AWARDS/APPRECIAT	500.00	0.00	0.00	0.00	0.00	500.00	100.00
013-660-5-910-00	CAPITAL EQUIPMEN	0.00	0.00	0.00	0.00	0.00	0.00	0.00
EMPLOYEE WELLNESS CENTER		2,537,831.82	87,374.28	4,104.96	1,476,423.88	133,393.27	928,014.67	36.57
Total EMPLOYEE WELLNESS CENTER		0.00	87,374.28	4,104.96	1,035,579.67	133,393.27	1,168,972.94	59.60



Cleveland County

NORTH CAROLINA

MEMORANDUM

TO: Cleveland County Consolidated Human Services Board

FROM: Tiffany Hansen, Assistant County Manager-CHSA

DATE: 1/7/2026

SUBJECT: Budget Amendments

ITEM NUMBER ONE

The North Carolina Department of Health and Human Services, Cancer Prevention and Control Branch, has allocated an additional \$400 for the CVD WISEWOMAN Activity. This increase is due to updated reimbursement rates, including an increase from \$250 to \$260 per CVD screening and an increase from \$15 to \$25 for each second and third HBSS session, effective December 1, 2025, through May 30, 2026. We request permission to budget these funds in the Adult Health Department (533) to support contracted services for this program.

ITEM NUMBER TWO

The Cleveland County Health Department has received \$334,012 in Prescription Drug rebate funds. We request permission to budget \$200,000 of these funds in the Employee Wellness Center (660) department and the remaining \$134,012 in the Primary Care (550) department. These funds will be used to offset the cost of Tier 3-5 prescription drugs for these two programs.

We appreciate your consideration of this matter.
TH/lm/

Public Health Center

200 SOUTH POST ROAD • SHELBY NC 28152
PHONE 980.484.5100 • FAX 980.484.5118

**Cleveland County
Consolidated Human Services Board
January 13, 2026**

**Shelby
North Carolina
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was any help for those that had referrals to Charlotte that needed transportation. Victoria explained that most of the clients do have Medicaid and will receive Medicaid transportation. Mr. Miller asked if we have patients that have had IVF. Victoria answered that we typically do not have those patients in our practice as this is usually through a private provider. Sara asked what the time limit is for Pregnancy Medicaid and Victoria answered that they have a year after delivery. Maggie asked if we do post-partum visits. Victoria answered that we do those visits in our family planning clinic. She also asked if we keep track of the percentage of people that come in for those visits following delivery. Victoria said we do not keep track of those but do encourage them to come in for those visits in our family planning clinic.

ORGANIZATIONAL CHART REVIEW:

Chair Karner introduced Tiffany Hansen to present the Organizational Chart Review. Tiffany explained that, since the agencies have consolidated, she wanted everyone to have a better perspective on the organizational charts for the Health Department, DSS, and the Consolidated agency. Copies of the organizational charts were emailed to all board members ahead of the meeting. She noted that she would not go into great detail as they are pretty self-explanatory but invited anyone with questions to reach out to her.

BUDGET AMENDMENTS:

ITEM NUMBER ONE:

The North Carolina Department of Health and Human Services, Cancer Prevention and Control Branch, has allocated an additional \$400 for the CVD Wisewoman Activity. This increase is due to updated reimbursement rates, including an increase from \$250 to \$260 per CVD screening and an increase from \$15 to \$25 for each second and third HBSS session, effective December 1, 2025, through May 30, 2026. We request permission to budget these funds in the Adult Health Department (533) to support contracted services for this program.

ITEM NUMBER TWO:

The Cleveland County Health Department has received \$334,012 in Prescription Drug rebate funds. We request permission to budget \$200,000 of these funds in the Employee Wellness Center (660) department and the remaining \$134,012 in the Primary Care (550) department. These funds will be used to offset the cost of Tier 3-5 prescription drugs for these two programs.

Motion: A motion to recommend the proposed budget amendments to the Board of Commissioners was made by Mr. Miller and a second was made by Allison Gragg. The motion carried unanimously.

MISCELLANEOUS:

**Cleveland County
Consolidated Human Services Board
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**Shelby
North Carolina
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Chair Karner asked if there was any additional business to discuss. There was no additional business to discuss.

ADJOURN: 7:29 PM

There being no further business, Chair Karner called for a motion to adjourn.

Motion: Mr. Miller moved, with a second by Marty Hamrick, that the Cleveland County Consolidated Human Services Board meeting be adjourned. The motion carried unanimously.

RESPECTFULLY SUBMITTED,

Tiffany Hansen, Secretary
Cleveland County Consolidated Human Services Agency

COUNTY OF CLEVELAND, NORTH CAROLINA

AGENDA ITEM SUMMARY

Board of Elections: Budget Amendment (BNA#042)

Department: Board of Elections

Agenda Title: Budget Amendment (BNA#042)

Agenda Summary:

Proposed Action:

ATTACHMENTS:

File Name	Description
<input type="checkbox"/> BNA_042_BOE_additional_funds_needed.pdf	BNA 042



Requesting Department: 413

<u>Department</u>		<u>Finance</u>	<u>County</u>
<u>Head</u>	<u>Budget Analyst Signature</u>	<u>Officer</u>	<u>Manager</u>
<u>Signature</u>		<u>Signature</u>	<u>Signature</u>
			

	<u>Ion Bishop</u>		
	01/27/2026		

Clerk to the Board

The above amendment has been approved and recorded in the minutes of the County Commissioners' meeting on



Forms & Supply, Inc.

Office: 6410 Orr Road, Charlotte, NC 28213

Remit To: Dept 720119, Box 1335, Charlotte, NC 28201

Phone: 704-598-8971

OFFICE FURNITURE QUOTE

DATE	QUOTE #
01/22/26	31799D
SALES REP	PAYMENT TERMS
Todd Ware (208)	Net 10

BILL TO:

IF NEED TO MAIL OUT INVOICE
CLEVELAND COUNTY
P.O. BOX 1210
SHELBY, NC 28151-1210
Account #: 4844840

CUSTOMER PURCHASE ORDER

PROJECT INFORMATION

FINAL LOCATION:

IF NEED TO MAIL OUT INVOICE
418 NEW Board of Elections Address
CLEVELAND COUNTY
827 W Marion St
Shelby, NC 28150-5062

ITEM #	QTY	PRODUCT	UNIT PRICE	EXT. PRICE
110 HALLWAY				

1		110 HALLWAY		
2	2.00	HON H895 .L \$(P1) .P Brigade 800 Series Lat File 5 Drawer .L = Standard Random Key Lock (Lock Opts) \$(P1) = P1 Paint Opts (Select Paint Color) .P = Black (Select Grade 1 Paint) -- TAG/LOCATION: 800 ST LAT,110 HALLWAY,18x42x64 -- CONTRACT: NC State Contract # 5610A	\$ 1,291.15	\$ 2,582.30

110 HALLWAY Subtotal: \$ 2,582.30

112 OFFICE

3		112 OFFICE		
4	1.00	HON H10502 \$(L1STD) .PINC 10500 Series Floorstnd Full Ht Ped B/B/F 15-5/8W x 22-3/4D \$(L1STD) = Grd L1 Standard Laminates (Select Laminate) .PINC = Pinnacle (Select Grade 1 Laminate Finish) -- TAG/LOCATION: 10500 SER,112 OFFICE,BBF -- CONTRACT: NC State Contract # 5610A	\$ 361.53	\$ 361.53
5	1.00	HON H10504 \$(L1STD) .PINC 10500 Series Floorstnding Full Ht Ped F/F 15-5/8W x 22-3/4D \$(L1STD) = Grd L1 Standard Laminates (Select Laminate) .PINC = Pinnacle (Select Grade 1 Laminate Finish) -- TAG/LOCATION: 10500 SER,112 OFFICE,FF -- CONTRACT: NC State Contract # 5610A	\$ 361.53	\$ 361.53



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Phone: 704-598-8971

OFFICE FURNITURE QUOTE

DATE	QUOTE #
01/22/26	31799D
SALES REP	PAYMENT TERMS
Todd Ware (208)	Net 10

ITEM #	QTY	PRODUCT	UNIT PRICE	EXT. PRICE
6	1.00	HON H10534K \$(L1STD) .PINC PINC 10500 Series 72x37 1/8 Stack-On Storage 4-Dr Locking ETA \$(L1STD) = Grd L1 Standard Laminates (Select Top Laminate Color) .PINC = Pinnacle (Select Top Laminate Color) PINC = Pinnacle (Select Chassis Laminate Color) -- TAG/LOCATION: 10500 SER,112 OFFICE,14x72x37 -- CONTRACT: NC State Contract # 5610A	\$ 576.81	\$ 576.81
7	1.00	HON H10561X \$(L1STD) .PINC PINC 10500 Series Return Shell 29-1/2H x 48W x 24D \$(L1STD) = Grd L1 Standard Laminates (Select Top Laminate Color) .PINC = Pinnacle (Select Top Laminate Color) PINC = Pinnacle (Select Chassis Laminate Color) -- TAG/LOCATION: 10500 SER,112 OFFICE,24/48 -- CONTRACT: NC State Contract # 5610A	\$ 276.51	\$ 276.51
8	1.00	HON H105856 \$(L1STD) .PINC 10500 Series Back enclosure for 72"W Stack on Storage \$(L1STD) = Grd L1 Standard Laminates (Select Laminate) .PINC = Pinnacle (Select Grade 1 Laminate Finish) -- TAG/LOCATION: 10500 SER,112 OFFICE,BACK(72) -- CONTRACT: NC State Contract # 5610A	\$ 126.36	\$ 126.36
9	1.00	HON H10592 \$(L1STD) .PINC PINC 10500 Series Desk Shell 72W x 30D x 29-1/2H \$(L1STD) = Grd L1 Standard Laminates (Select Top Laminate Color) .PINC = Pinnacle (Select Top Laminate Color) PINC = Pinnacle (Select Chassis Laminate Color) -- TAG/LOCATION: 10500 SER,112 OFFICE,30/72 -- CONTRACT: NC State Contract # 5610A	\$ 402.48	\$ 402.48
10	1.00	HON H1522 \$(L1STD) .PINC Wood Center Drawer 22W x 15-3/8D \$(L1STD) = Grd L1 Standard Laminates (Select Laminate) .PINC = Pinnacle (Select Grade 1 Laminate Finish) -- TAG/LOCATION: LAM CTR DR,112 OFFICE,CD -- CONTRACT: NC State Contract # 5610A	\$ 94.46	\$ 94.46
11	1.00	HON H90056 \$(A) .APN 23 10500 Series Tckbd for 72"W Stack on Strg Bck Enclosure \$(A) = Grd A Fab (Fabric Selection)	\$ 202.47	\$ 202.47



Forms & Supply, Inc.

Office: 6410 Orr Road, Charlotte, NC 28213

Remit To: Dept 720119, Box 1335, Charlotte, NC 28201

Phone: 704-598-8971

OFFICE FURNITURE QUOTE

DATE	QUOTE #
01/22/26	31799D
SALES REP	PAYMENT TERMS
Todd Ware (208)	Net 10

ITEM #	QTY	PRODUCT	UNIT PRICE	EXT. PRICE
		.APN = Appoint (Grd A Fab) 23 = Espresso (Select Appoint Fabric Color) -- TAG/LOCATION: LAM ACC,112 OFFICE,TB(72) -- CONTRACT: NC State Contract # 5610A		
12	1.00	HON HMASD .BLK Dual Dynamic Monitor Arm .BLK = Black (Select Paint) -- TAG/LOCATION: OPTNL ACC,112 OFFICE,MA -- CONTRACT: NC State Contract # 5610A	\$ 394.32	\$ 394.32
13	2.00	HON HPACSM .BLK Sliding mount for monitor arm .BLK = Black (Select Paint) -- TAG/LOCATION: OPTNL ACC,112 OFFICE,SM -- CONTRACT: NC State Contract # 5610A	\$ 85.25	\$ 170.50
112 OFFICE Subtotal:				\$ 2,966.97
114 OFFICE				
14		114 OFFICE		
15	1.00	HON H10502 \$(L1STD) .PINC 10500 Series Floorstnd Full Ht Ped B/B/F 15-5/8W x 22-3/4D \$(L1STD) = Grd L1 Standard Laminates (Select Laminate) .PINC = Pinnacle (Select Grade 1 Laminate Finish) -- TAG/LOCATION: 10500 SER,114 OFFICE,BBF -- CONTRACT: NC State Contract # 5610A	\$ 361.53	\$ 361.53
16	1.00	HON H10504 \$(L1STD) .PINC 10500 Series Floorstnding Full Ht Ped F/F 15-5/8W x 22-3/4D \$(L1STD) = Grd L1 Standard Laminates (Select Laminate) .PINC = Pinnacle (Select Grade 1 Laminate Finish) -- TAG/LOCATION: 10500 SER,114 OFFICE,FF -- CONTRACT: NC State Contract # 5610A	\$ 361.53	\$ 361.53
17	1.00	HON H10534K \$(L1STD) .PINC PINC 10500 Series72x37 1/8 Stack-On Storage 4-Dr Locking ETA \$(L1STD) = Grd L1 Standard Laminates (Select Top Laminate Color)	\$ 576.81	\$ 576.81



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DATE	QUOTE #
01/22/26	31799D
SALES REP	PAYMENT TERMS
Todd Ware (208)	Net 10

ITEM #	QTY	PRODUCT	UNIT PRICE	EXT. PRICE
		.PINC = Pinnacle (Select Top Laminate Color) PINC = Pinnacle (Select Chassis Laminate Color) -- TAG/LOCATION: 10500 SER,114 OFFICE,14x72x37 -- CONTRACT: NC State Contract # 5610A		
18	1.00	HON H10561X \$(L1STD) .PINC PINC 10500 Series Return Shell 29-1/2H x 48W x 24D \$(L1STD) = Grd L1 Standard Laminates (Select Top Laminate Color) .PINC = Pinnacle (Select Top Laminate Color) PINC = Pinnacle (Select Chassis Laminate Color) -- TAG/LOCATION: 10500 SER,114 OFFICE,24/48 -- CONTRACT: NC State Contract # 5610A	\$ 276.51	\$ 276.51
19	1.00	HON H105856 \$(L1STD) .PINC 10500 Series Back enclosure for 72"W Stack on Storage \$(L1STD) = Grd L1 Standard Laminates (Select Laminate) .PINC = Pinnacle (Select Grade 1 Laminate Finish) -- TAG/LOCATION: 10500 SER,114 OFFICE,BACK(72) -- CONTRACT: NC State Contract # 5610A	\$ 126.36	\$ 126.36
20	1.00	HON H10592 \$(L1STD) .PINC PINC 10500 Series Desk Shell 72W x 30D x 29-1/2H \$(L1STD) = Grd L1 Standard Laminates (Select Top Laminate Color) .PINC = Pinnacle (Select Top Laminate Color) PINC = Pinnacle (Select Chassis Laminate Color) -- TAG/LOCATION: 10500 SER,114 OFFICE,30/72 -- CONTRACT: NC State Contract # 5610A	\$ 402.48	\$ 402.48
21	1.00	HON H1522 \$(L1STD) .PINC Wood Center Drawer 22W x 15-3/8D \$(L1STD) = Grd L1 Standard Laminates (Select Laminate) .PINC = Pinnacle (Select Grade 1 Laminate Finish) -- TAG/LOCATION: LAM CTR DR,114 OFFICE,CD -- CONTRACT: NC State Contract # 5610A	\$ 94.46	\$ 94.46
22	1.00	HON H90056 \$(A) .APN 23 10500 Series Tckbd for 72"W Stack on Strg Bck Enclosure \$(A) = Grd A Fab (Fabric Selection) .APN = Appoint (Grd A Fab) 23 = Espresso (Select Appoint Fabric Color) -- TAG/LOCATION: LAM ACC,114 OFFICE,TB(72) -- CONTRACT: NC State Contract # 5610A	\$ 202.47	\$ 202.47



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OFFICE FURNITURE QUOTE

DATE	QUOTE #
01/22/26	31799D
SALES REP	PAYMENT TERMS
Todd Ware (208)	Net 10

ITEM #	QTY	PRODUCT	UNIT PRICE	EXT. PRICE
23	2.00	HON HFSC183640R .X \$(P1) .P Flagship Stg Cab 39 1/8Hx36Wx18D R Pulls-2 Adj Shlf .X = OMT Core to Order Key Alike (Lock/Omt Opts) \$(P1) = P1 Paint Opts (Select Paint Color) .P = Black (Select Grade 1 Paint) -- TAG/LOCATION: FLGSHP SC,114 OFFICE,36/3 -- CONTRACT: NC State Contract # 5610A	\$ 665.76	\$ 1,331.52
24	1.00	HON HMASD .BLK Dual Dynamic Monitor Arm .BLK = Black (Select Paint) -- TAG/LOCATION: OPTNL ACC,114 OFFICE,MA -- CONTRACT: NC State Contract # 5610A	\$ 394.32	\$ 394.32
25	2.00	HON HPACSM .BLK Sliding mount for monitor arm .BLK = Black (Select Paint) -- TAG/LOCATION: OPTNL ACC,114 OFFICE,SM -- CONTRACT: NC State Contract # 5610A	\$ 85.25	\$ 170.50
26	1.00	HON HWR1872PN \$(L1STD) .PINC .PINC Systems Rectangle Worksurface 18Dx72W Edgeban \$(L1STD) = Grd L1 Standard Laminates (Select Laminate) .PINC = Pinnacle (Select Grade 1 Laminate Finish) .PINC = Pinnacle (Select Edgeband Color) -- TAG/LOCATION: SYS WKSF,114 OFFICE,18/72 -- CONTRACT: NC State Contract # 5610A	\$ 224.04	\$ 224.04

114 OFFICE Subtotal: \$ 4,522.53

123 TRAINING ROOM

27 123 TRAINING ROOM

28	2.00	HON HTMC304272 .N \$(L1STD) .PINC .PINC .C \$(P1) .P Preside 42x72 Seatd Mobile Collab Tbl .N = No Grommets (Select Grommet) \$(L1STD) = Grd L1 Standard Laminates (Laminate Top Selection)	\$ 999.57	\$ 1,999.14
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OFFICE FURNITURE QUOTE

DATE	QUOTE #
01/22/26	31799D
SALES REP	PAYMENT TERMS
Todd Ware (208)	Net 10

ITEM #	QTY	PRODUCT	UNIT PRICE	EXT. PRICE
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.PINC = Pinnacle (Select Grade 1 Laminate Finish)
.PINC = Pinnacle (Select Edgeband Color)
.C = Caster (Select Caster/Glide Option)
\$(P1) = P1 Paint Opts (Paint Selection)
.P = Black (Select Grade 1 Paint)
-- TAG/LOCATION: PRESIDE LM,123 TRAINING ROOM,72/42/30H
-- CONTRACT: NC State Contract # 5610A

123 TRAINING ROOM Subtotal: \$ 1,999.14

124 ONE STOP VOTTING

29		124 ONE STOP VOTTING		
30	1.00	HON HTLCRED42S \$(L1STD) .PINC .PINC \$(L1STD) .PINC .G .N \$(L1STD) .PINC Preside 20x42 36H Hospitality Credenza w/Shelf \$(L1STD) = Grd L1 Standard Laminates (Laminate Top Selection) .PINC = Pinnacle (Select Grade 1 Laminate Finish) .PINC = Pinnacle (Select Edgeband Color) \$(L1STD) = Grd L1 Standard Laminates (Laminate Chassis Selection) .PINC = Pinnacle (Select Grade 1 Laminate Finish) .G = Loop Black (Select Pull) .N = No Cutout (Back Cutout Selection) \$(L1STD) = Grd L1 Standard Laminates (Laminate Shelf Selection) .PINC = Pinnacle (Select Grade 1 Laminate Finish) -- TAG/LOCATION: PRESIDE LM,124 ONE STOP VOTTING,20x42 -- CONTRACT: NC State Contract # 5610A	\$ 1,090.05	\$ 1,090.05
31	1.00	HON HTLLECTA \$(L1STD) .PINC .G Preside Laminate Lectern \$(L1STD) = Grd L1 Standard Laminates (Select Laminate Finish) .PINC = Pinnacle (Select Grade 1 Laminate Finish) .G = Loop Black (Select Pull) -- TAG/LOCATION: Preside LM,124 ONE STOP VOTTING,HTLLECTA -- CONTRACT: NC State Contract # 5610A	\$ 789.36	\$ 789.36

124 ONE STOP VOTTING Subtotal: \$ 1,879.41

Keys

32	Keys
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OFFICE FURNITURE QUOTE

DATE	QUOTE #
01/22/26	31799D
SALES REP	PAYMENT TERMS
Todd Ware (208)	Net 10

ITEM #	QTY	PRODUCT	UNIT PRICE	EXT. PRICE
33	2.00	HON HF22 Master Key (One Key) -- TAG/LOCATION: HON ACCESS,Keys,Keys -- CONTRACT: NC State Contract # 5610A	\$ 19.53	\$ 39.06
34	3.00	HON HF23B .X101E Black Removable Lock Core Kit .X101E = 101E (Select Key Number) -- TAG/LOCATION: LAM ACC,Keys,Keys -- CONTRACT: NC State Contract # 5610A	\$ 22.75	\$ 68.25
35	4.00	HON HF23B .X102E Black Removable Lock Core Kit .X102E = 102E (Select Key Number) -- TAG/LOCATION: LAM ACC,Keys,Keys -- CONTRACT: NC State Contract # 5610A	\$ 22.75	\$ 91.00
36	2.00	HON HF23B .X103E Black Removable Lock Core Kit .X103E = 103E (Select Key Number) -- TAG/LOCATION: LAM ACC,Keys,Keys -- CONTRACT: NC State Contract # 5610A	\$ 22.75	\$ 45.50
37	2.00	HON HF27B .X101E Black Removable Lock Core Kit .X101E = 101E (Select Key Number) -- TAG/LOCATION: LAM ACC,Keys,Keys -- CONTRACT: NC State Contract # 5610A	\$ 22.75	\$ 45.50
38	2.00	HON HF27B .X102E Black Removable Lock Core Kit .X102E = 102E (Select Key Number) -- TAG/LOCATION: LAM ACC,Keys,Keys -- CONTRACT: NC State Contract # 5610A	\$ 22.75	\$ 45.50

Keys Subtotal: \$ 334.81

39	1.00	HON H2091 .H \$(1) .CU 49 .T Pillowsoft 2090 Exec High-Back Swivel Tilt Arms	\$ 410.28	\$ 410.28
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01/22/26	31799D
SALES REP	PAYMENT TERMS
Todd Ware (208)	Net 10

ITEM #	QTY	PRODUCT	UNIT PRICE	EXT. PRICE
		.H = Select Caster Option: Hard (Standard) \$(1) = Select Upholstery: Grade 1 Uph .CU = Grade 1 Fab: Centurion 49 = Centurion: Espresso .T = Frame Color Selection: Black -- TAG/LOCATION: Boardroom -- CONTRACT: NC State Contract # 5610A		
40	3.00	HON H105690 \$(L1STD) .PINC PINC 10500 Series 36Wx24Dx29-1/2H Lateral File Two-Drawer \$(L1STD) = Select Top Laminate Color: Grd L1 Standard Laminates .PINC = Select Top Laminate Color: Pinnacle PINC = Select Chassis Laminate Color: Pinnacle -- TAG/LOCATION: TBD -- CONTRACT: NC State Contract # 5610A	\$ 539.37	\$ 1,618.11
41	2.00	HON H105292 \$(L1STD) .PINC PINC 1050 Series Bookcase Hutch 36"W x 37-1/8"H \$(L1STD) = Select Top Laminate Color: Grd L1 Standard Laminates .PINC = Select Top Laminate Color: Pinnacle PINC = Select Chassis Laminate Color: Pinnacle -- TAG/LOCATION: TBD -- CONTRACT: NC State Contract # 5610A	\$ 301.47	\$ 602.94
42	6.00	HON HIWMM .Y2 .A .S .IM \$(1) .CU 49 .BL .SB .T Ignition 2 Task Mid-back .Y2 = Control Type: Advanced Synchro-Tilt SeatSlidr .A = Select Arm Type: Height and Width Adj. Arm .S = Select Caster/Glide Option: Black All-Surface Caster .IM = Select Mesh Color: 4-Way Black \$(1) = Select Upholstery: Grade 1 Uph .CU = Grade 1 Fab: Centurion 49 = Centurion: Espresso .BL = Select Lumbar: Black Adjustable Lumbar .SB = Select Base: Standard Base .T = Select Frame Color: Black -- TAG/LOCATION: Clifton Philbeck -- CONTRACT: NC State Contract # 5610A	\$ 391.56	\$ 2,349.36
43	6.00	HON HIGS6 .F .E .U \$(1) .CU 49 .T Ignition Guest/Multi-Purpose Chair Four-Leg Stacking .F = Select Arm Type: Fixed .E = Select Caster/Glide Option: Nylon Glide	\$ 247.65	\$ 1,485.90



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01/22/26	31799D
SALES REP	PAYMENT TERMS
Todd Ware (208)	Net 10

ITEM #	QTY	PRODUCT	UNIT PRICE	EXT. PRICE
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.U = Select Back: Upholstered
 \$(1) = Select Upholstery: Grade 1 Uph
 .CU = Grade 1 Fab: Centurion
 49 = Centurion: Espresso
 .T = Select Frame Color: Black
 -- CONTRACT: NC State Contract # 5610A

X _____ Date _____
 Title _____
 CLEVELAND COUNTY

SUBTOTAL	\$20,751.75
FREIGHT	\$0.00
DELIVERY/SET-UP	\$4,469.62
SALES TAX (6.75%)	\$1,702.44
TOTAL	\$26,923.81

DEPOSIT REQUESTED \$0.00

BALANCE	\$26,923.81
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Effective 01/01/26: A 3% fee applies to credit card payments on invoices over \$1,000. This fee does not apply to prepaid invoices, ACH/check payments, or where prohibited by law or contract. If you choose this option, \$807.71 will be added to the total.

FURNITURE AGREEMENT TERMS & CONDITIONS

ACCEPTANCE

The Customer agrees to purchase the merchandise described in the above quote in accordance with all items therein described. Merchandise remains the property of FSlooffice until paid in-full. All quoted prices are firm for a period of thirty (30) days from the date of the proposal. Prices include local delivery. All additional charges such as freight, installation, labor etc... will be listed separately. Labor and installation will be taxed per state tax laws, such taxes will be added to the invoice at the time of billing. Customers who are exempt from taxes shall provide FSlooffice a current Certificate of Exemption at time of purchase and execution of this agreement.

CHANGES, CANCELLATIONS & RETURNS

This agreement to proceed with the order is binding. Any subsequent changes are subject to our ability to conform and are dependent upon factory approval. Changes in quantity or specifications are subject to approval by FSlooffice and Manufacturer. All request for changes in quantity or specification must be delivered to FSlooffice in writing. All items that are ordered specifically for the Customer and are not FSlooffice's normal inventory may not be subject to cancellation or return once put into production by the manufacturer. All request for such cancellations or returns must be in writing and are subject to approval by FSlooffice. A restocking charge of thirty-five (35%) or a minimum of \$75.00 will be imposed for all approved items at FSlooffice's discretion.

DELIVERY & INSTALLATION

In the event that delivery and/or installation are required as a part of the proposal, the following provisions apply:

Condition of job site: The job site shall be clean and free of debris prior to installation.

Job site services: Electric current, heat, hoisting, and/or elevator will be furnished without charge to FSlooffice. Adequate facilities for off-loading, staging, moving, and handling of merchandise shall be provided.

Delivery hours: Delivery and Installation will be made during normal business hours. Additional labor cost resulting from overtime work performed at the Customer's request, after authorization by FSlooffice, shall be passed on to the Customer.

Erection & Assembly: FSlooffice's ability to erect or assemble furniture shipped knock-down, or to permanently attach, affix or bolt-in-place moveable furniture is dependent upon jurisdiction agreements between trade unions at the job site.

Design and Installation service: Customer shall sign off on final drawings prior to order being entered. Installation service shall include initial placement of furniture at the designed location in accordance with the plan specifications and final drawings.

Protection of delivered goods: Furnishings delivered and brought onto job site shall be inspected and conditionally accepted by the Customer. At time of initial delivery the responsibility for the security and safeguarding of delivered furnishings shall at that time pass to the Customer.

Acceptance of delivery: Constitutes acceptance of the merchandise as delivered and FSloffice's ratification of the terms of the agreement.

TERMS OF PAYMENT

FSloffice reserves the right to accept credit cards as a form of payment. *A 3% fee applies to credit card payments on invoices over \$1,000. This fee does not apply to prepaid invoices, ACH/check payments, or where prohibited by law or contract.* All orders are net ten (10) days from completion/punch list acceptance. Orders may require a deposit of fifty percent (50%) down at time of order and remain the property of FSloffice until order is paid in full. In such cases as short shipment, damaged merchandise or manufacturer error, payment on those items may be withheld until replacement items have been delivered. In the event that construction delays or other causes, not within FSloffice's control, which force postponement of the installation, Seller will store the furnishings until installation can resume.

Storage charges may apply.**GENERAL LIABILITY**

No liability shall accrue against the Seller as a result of any breach of these Terms & Conditions resulting from any strike, lock-out, work stoppage, accident, Act of God, or other delay beyond the Seller's control. Terms & Conditions set forth herein may be altered only upon written approval of both Customer and FSloffice. By acceptance of this agreement, Buyer acknowledges receipt of a duly executed duplicate of this agreement.

Acceptance of Proposal:

Customer Signature: _____ Date: _____

COUNTY OF CLEVELAND, NORTH CAROLINA

AGENDA ITEM SUMMARY

Request to Set a Public Hearing on Tuesday, March 17, 2026, for Planning Case 16-02 Request to Rezone 132, 136, and 140 Jim Patterson Road from General Business-Conditional Use (GB-CU) to General Business-Conditional Use (GB-CU) to Develop a Recreational Vehicle Park

Department: Planning Department

Agenda Title: Request to Set a Public Hearing on Tuesday, March 17, 2026, for Planning Case 16-02 Request to Rezone 132, 136, and 140 Jim Patterson Road from General Business-Conditional Use (GB-CU) to General Business-Conditional Use (GB-CU) to Develop a Recreational Vehicle Park

Agenda Summary:

Proposed Action:

ATTACHMENTS:

File Name	Description
<input type="checkbox"/> 26-02_1._Staff_Report_BOC_Set_Hearing.pdf	16-02 Staff Report
<input type="checkbox"/> 26-02_Zoning_Map.pdf	16-02 Map
<input type="checkbox"/> 26-02_Site_Plan.pdf	16-02 Site Plan

STAFF REPORT

To: Board of Commissioners
From: Chris Martin, Planning Director
Date: February 3rd, 2026
Subject: Case 26-02 Rezoning GB-CU to GB-CU for a RV park at 132, 136, and 140 Jim Patterson Road.
Parcel(s): 10559, 10558, and 10557

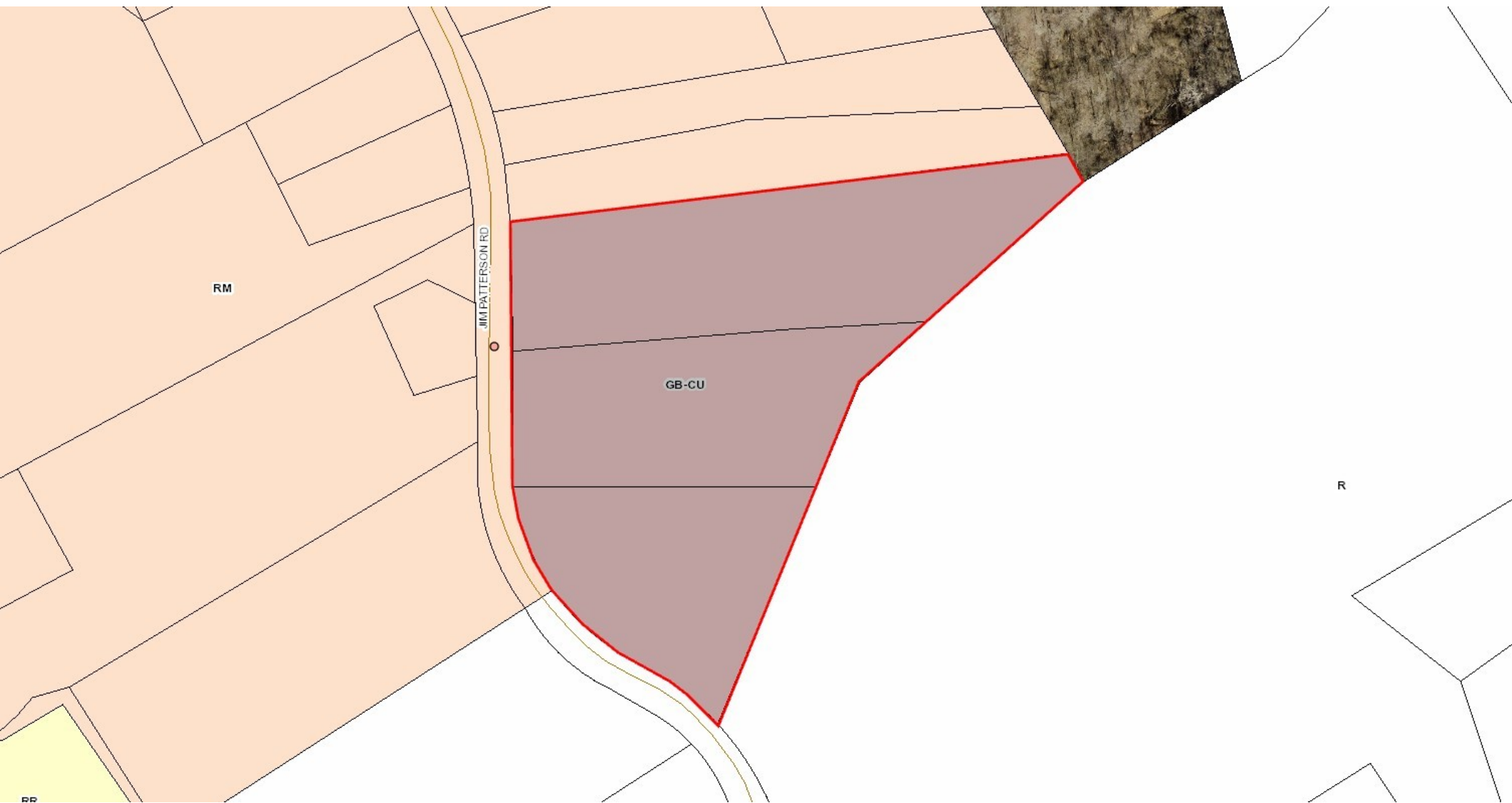
Summary Statement: Jay Little is requesting to re-zone 132, 136, and 140 Jim Patterson Road, a total of 12.24 acres on three parcels, from General Business – Conditional Use to General Business – Conditional Use for the purpose of developing a Recreational Vehicle Park.

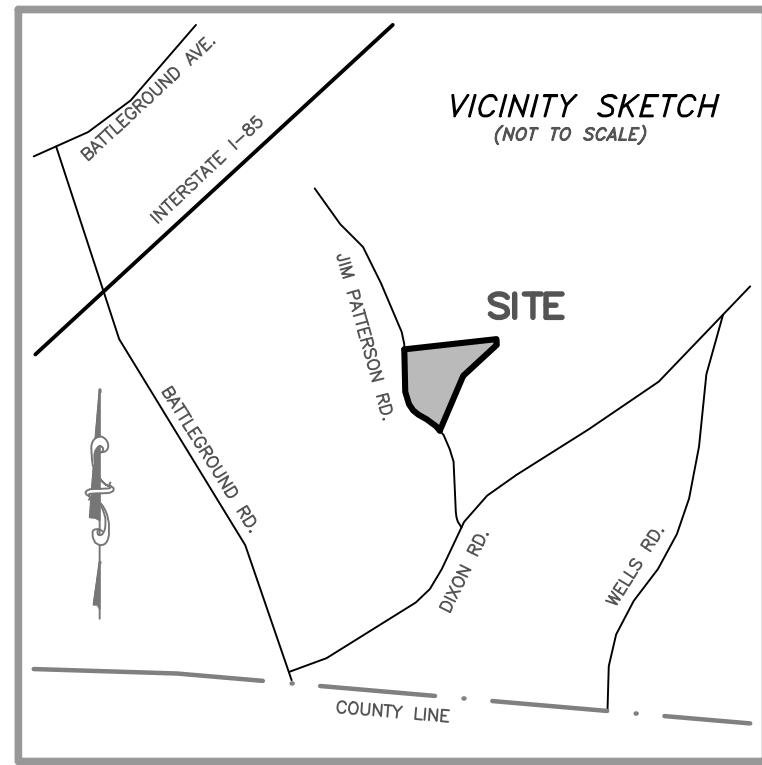
Review: This property lies on the eastern side of Jim Patterson Road approximately 1200 ft. north from the intersection with Dixon School Road.

The surrounding uses consist primarily of residential mixed with some agricultural uses on larger lots. The surrounding zoning districts are Residential to the east and south of the subject property. The land directly to the north and to the west on the opposing side of Jim Patterson Road is designated Residential Manufactured Homes and Parks. The Land Use Plan shows this area as Primary Growth Area.

Planning Board: The planning board can review the request at their February 24th, 2026 regular meeting.

Requested Board Action: Consider setting a public hearing for your regular meeting on **Tuesday, March 17th, 2026 at 6pm.**





LEGEND	
	SURVEYED BOUNDARY LINES
	LINE NOT SURVEYED
	RIGHT OF WAY LINE
	FENCE LINE
	ELECTRIC LINE
	BURIED ELECTRIC LINE
	WATER LINE
	GAS LINE
	SAN SEWER LINE
	TELEPHONE LINE
	HYDRANT
	GAS METER
	WATER METER
	POWER POLE
	TELEPHONE BOX
	NEW IRON PIN (NIP)
	EXISTING IRON PIN (EIP)
	UNMONUMENTED POINT
	MAG NAIL
	CONCRETE MONUMENT
	R.R. SPIKE SET
	R.R. SPIKE FOUND
	(f) = FOUND
	(s) = SET
	STONE
	TREE
	WELL

NOTES:

- AREA BY COORDINATE COMPUTATION.
- ALL DISTANCES ARE HORIZONTAL DISTANCES, IN US FEET.
- SUBJECT TO ANY AND ALL EASEMENTS, RIGHTS OF WAYS, STREETS AND ASSESSMENTS, AS THE SAME MAY APPEAR OF RECORD IN THE REGISTER OF DEEDS OFFICE, CLERK OF COURT, TOWN OR COUNTY TAX OFFICE, OR WHICH MAY HAVE BEEN ACQUIRED BY PREScriptive USE.
- PROPERTY LINES SHOWN ARE BASED ON EXISTING DEEDS, PLATS AND VISIBLE MONUMENTATION DISCOVERED ALONG THE PROJECT AREA.
- NO GRID COORDINATES AS SHOWN HEREON ARE BASED ON GPS OBSERVATION UTILIZING NAD83 NETWORK RTK SYSTEM AND ORUS AND ARE REFERENCED TO THE NAD 83(2011) DATUM.
- OTHER UTILITIES WHICH WERE NOT OBSERVED AND NOT SHOWN HEREON MAY EXIST. IT IS THE OWNERS/TENANTS RESPONSIBILITY TO VERIFY THE LOCATION PRIOR TO COMMENCEMENT OF ANY CONSTRUCTION. LATTIMORE AND PEELER CANNOT ASSUME RESPONSIBILITY FOR MISIDENTIFICATION OR OMISSION OF UNDERGROUND UTILITIES.
- NO DOT RIGHT OF WAYS ARE APPROXIMATE UNLESS OTHERWISE NOTED.
- NO TITLE SEARCH BY LATTIMORE AND PEELER SURVEYING.
- PROPERTY SHOWN SUBJECT TO EASEMENTS OF RECORD.

COUNTY UDO PLAN COMPLIANCE NOTES:

Sec. 12-161. - Recreational Vehicle Parks.

- (a) The purpose of these regulations is to allow for the placement and growth of recreational vehicle parks while maintaining the health, safety, and general welfare standards of established residential and commercial areas in Cleveland County.
- (b) Recreational vehicle parks shall be allowed pursuant to section 12-124 and are subject to the following standards:
- (1) No recreational vehicle park shall exist on a single parcel that is less than three (3) acres in size.
- (2) Density.
- a. There shall be a minimum distance of one (1) mile, (five thousand two hundred eighty (5,280) feet), from one (1) parcel containing a permitted recreational vehicle park to another parcel containing a permitted recreational vehicle park, this distance being measured using property boundaries of the least distance between the parcels. A recreational vehicle park shall be considered "permitted" for the purposes of this section once the applicant has obtained a zoning or special use permit, as the case may be, to use property for a recreational vehicle park. If said zoning or special use permit expires, the recreational vehicle park shall no longer be considered "permitted" under this section.
- b. There shall be no more than six (6) recreational vehicle sites per acre within a single recreational vehicle park.
- c. For recreational vehicle parks within the water supply critical area overlay district, there shall be no more than three (3) recreational vehicle sites per one (1) acre.
- d. Each recreational vehicle site shall include a parking spot that is at least twenty (20) feet wide and forty (40) feet long.
- (3) Setbacks.
- a. A setback of one hundred (100) feet shall be required from all public or private rights-of-way, and a setback of fifty (50) feet shall be required from all other property lines.
- b. A setback of twenty (20) feet shall be required between recreational vehicle sites.
- (4) Type B screening, as outlined in section 12-305, shall be required along all exterior property lines, unless existing screening is deemed sufficient by the administrator or the board of adjustment.
- (5) An approved dumpster shall be required that is not visible from an adjoining property or a public street.
- (6) Roads and road access.
- a. No recreational vehicle site shall have direct access to a public road. Recreational vehicle sites shall be accessible only from interior roads.
- b. Access roads shall be compliant with any applicable standards set forth in Appendix D of the North Carolina Fire Code, Fire Apparatus Roads, as determined by the fire code official.
- (7) One non-illuminated sign allowed with a maximum area of twenty-five (25) square feet shall be allowed. The sign shall be set back a minimum of ten (10) feet from any property line or road right-of-way. No other signage shall be permitted unless required by law.
- (8) Each recreational vehicle site shall have an address posted thereon to distinguish it from other sites on the property.
- (9) The applicant shall obtain any required local and state permits such as environmental, building and North Carolina Department of Transportation driveway permits.

VINH T. NGUYEN
TRANSFORMATION PROPERTIES, LLC
8349 BRICKLE LANE
HUNTERSVILLE, NC 28078
PARCEL #: 66824
ZONING: RM
USE: RESIDENTIAL

WILLIAM F. & LULA MAY GREEN
LIFE ESTATE
141 JIM PATTERSON ROAD
KINGS MOUNTAIN, NC 28086
PARCEL #: 10556
ZONING: RM
USE: RESIDENTIAL

WILLIAM D. GREEN
141 JIM PATTERSON ROAD
KINGS MOUNTAIN, NC 28086
PARCEL #: 55105
ZONING: RM
USE: RESIDENTIAL

WILLIAM F. & LULA MAY GREEN
LIFE ESTATE
141 JIM PATTERSON ROAD
KINGS MOUNTAIN, NC 28086
PARCEL #: 10556
ZONING: RM
USE: RESIDENTIAL

BARRY A. GILLESPIE
STEPHANIE A. SMITH
133 JIM PATTERSON ROAD
KINGS MOUNTAIN, NC 28086
PARCEL #: 10563
ZONING: RM
USE: RESIDENTIAL

IRIS R. SOJIS &
HUGO C. MONTES
127 JIM PATTERSON ROAD
KINGS MOUNTAIN, NC 28086
PARCEL #: 10561
ZONING: R
USE: RESIDENTIAL

ALAN T. & DONNA R. MCNAMARA
116 WILDER LANE
KINGS MOUNTAIN, NC 28086
PARCEL #: 10556
ZONING: RM
USE: RESIDENTIAL

CITY OF KINGS MOUNTAIN
P.O. BOX 429
KINGS MOUNTAIN, NC 28086
PARCEL #: 10523
ZONING: RU
USE: RESIDENTIAL

MARK E. HUGHES &
PATRICIA M. HUGHES LIFE ESTATE
850 DIXON SCHOOL ROAD
KINGS MOUNTAIN, NC 28086
PARCEL #: 10561
ZONING: R
USE: VACANT

APPLICANT INFORMATION:

A LITTLE SOUTHERN STAY, LLC
9850 BLACK HORSE RUN
INDIAN LAND, SC 29707

CONTACT: JAY LITTLE
(704) 918-0265
turo.little@gmail.com

PARCEL INFORMATION:

PARCEL NO. #'s : 10057, 10058, 10059
OWNER: A LITTLE SOUTHERN STAY, LLC
9850 BLACK HORSE RUN
INDIAN LAND, SC 29707
ADDRESS: 132, 134, 140 JIM PATTERSON ROAD
KINGS MOUNTAIN, NC
CLEVELAND COUNTY

TOTAL ACREAGE: 12.24 AC.
DEED BOOK: 1850 DEED PAGE: 1747
EXISTING ZONING: GB-CU
PROPOSED ZONING: GB / CONDITIONAL USE
(RV CAMPGROUND)

PROPOSED USE: RV CAMPGROUND FACILITY

PROPOSED RV SITES:
6 SITES PER AC. (MAXIMUM)
NUMBER SITES ALLOWED: 73 SITES
TOTAL PROPOSED SITES: 25 SITES

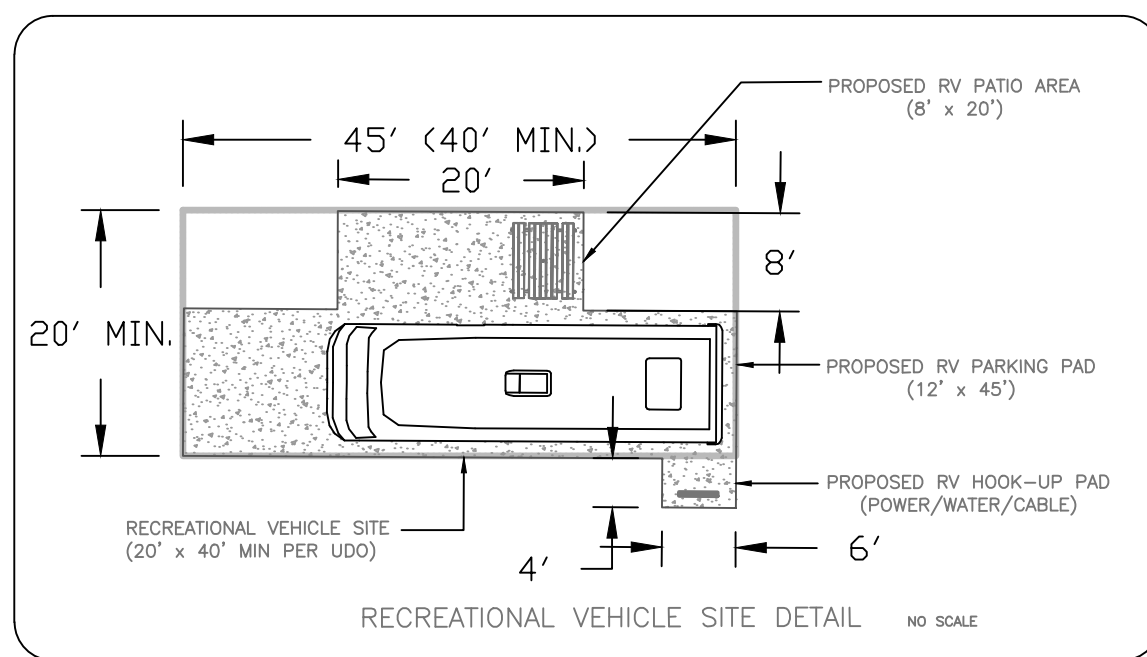
PROPOSED BUILDING TYPE:

OFFICE/ OPERATION BUILDING - METAL CONST.
BUILDING SETBACKS:
PUBLIC/PRIVATE R/W 100'
PROPERTY LINES (ALL OTHER) 50'
RV SITE SEPARATION 20'

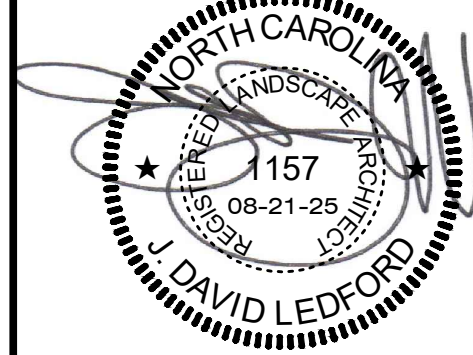
WATERSHED: NOT IN A PROTECTED
FLOODPLAIN: NO FLOODPLAIN ON-SITE
WETLANDS: NO WETLANDS PER NATIONAL
WETLAND INVENTORY

PLAN DESIGN INFORMATION:

SITE DEVELOPMENT:
J. DAVID LEDFORD, RLA
2730 MAIDEN HIGHWAY
LINCOLNTON, NC 28092
CONTACT: DAVID LEDFORD, RLA
(704) 530-7880



Course	Bearing	Distance
L1	S 89°42'05" W	47.53'
L2	N 58°11'45" W	204.67'
L3	N 37°22'15" W	176.95'
L4	N 20°38'05" W	90.87'
L5	N 08°38'05" W	148.71'
L6	N 08°37'55" W	122.14'
L7	N 08°40'35" W	39.77'
L8	N 08°34'20" W	29.18'
L9	N 10°15'35" E	45.20'
L10	N 10°14'45" E	161.62'



J.DAVIDLEDFORD, RLA

LANDSCAPE ARCHITECTURE LAND PLANNING SEDIMENT EROSION CONTROL STORMWATER PLANNING

jdaavidledford@yahoo.com
CELL (704) 530-7880

2730 Maiden Highway
Lincolnton, NC 28092

PLAN DATE: 08/19/25

DRAWN BY: JDL

CHECKED BY: JDL

REVISIONS:

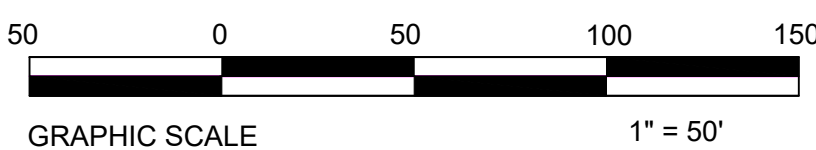
PROJECT DESCRIPTION:

PROPOSED SITE PLAN
A LITTLE SOUTERN STAY

JIM PATTERSON ROAD, KINGS MOUNTAIN, NC

DRAWING
NUMBER:

S1



COUNTY OF CLEVELAND, NORTH CAROLINA

AGENDA ITEM SUMMARY

Economic Development: Request to Set a Public Hearing on Tuesday, March 17, 2025, for Project Maple Leaf

Department: Economic Development

Agenda Title: Request to Set a Public Hearing on Tuesday, March 17, 2025, for Project Maple Leaf

Agenda Summary:

Proposed Action:

ATTACHMENTS:

File Name	Description
<input type="checkbox"/> Project_Maple_Staff_Report_-_1.23.2026_-_CONFIDENTIAL.pdf	Staff Report Project Maple



CONFIDENTIAL | ECONOMIC DEVELOPMENT STAFF REPORT

To: David Cotton, County Manager
Date: January 23, 2026
From: Courtney Ashley, Executive Director of CCEDP
Subject: Project Maple Financial Incentives

SUMMARY STATEMENT:

- Project Maple is a manufacturing employer in Cleveland County who is considering expansion in Shelby, North Carolina and Chesnee, South Carolina. Labor and skill availability, operating costs and tax climate including incentives are drivers for the expansion.
- 44 new jobs with \$53,529 average wage
- \$17,350,000 real and personal property investment over 3 years

PROJECT MAPLE INCENTIVE PROPOSAL:

The proposed grant would be for three (3) years at 20% of the \$0.5475 tax rate.

YEARS	NEW JOBS	NEW INVESTMENT (CUMMULATIVE)	GRANT AMOUNT (20% of the \$0.5475 tax rate for 3 years)
1	15	\$12,500,000.00	\$13,687.50
2	15	\$16,500,000.00	\$18,067.50
3	14	\$17,350,000.00	\$18,998.25
TOTAL	44	\$17,350,000.00	\$50,753.25

Additionally, CCEDP recommends that Cleveland County serve as the local government applicant for the Department of Commerce's Rural Division Building Reuse Grant.

PROS: New tax revenue for the County and jobs would be created at substantially higher wages than the county average of \$51,381.

CONS: None

FISCAL IMPACT: \$50,753.25

COUNTY OF CLEVELAND, NORTH CAROLINA

AGENDA ITEM SUMMARY

Planning Case 26-01 Request to Rezone 109 Catalina Court from Restricted Residential (RR) to Rural Residential (RU)

Department:

Agenda Title: Planning Case 26-01 Request to Rezone 109 Catalina Court from Restricted Residential (RR) to Rural Residential (RU)

Agenda Summary: Chris Martin, Planning Director

Proposed Action:

ATTACHMENTS:

File Name	Description
<input type="checkbox"/> 26-01_1_Staff_Report_PH.pdf	Case 26-01 Staff Report

STAFF REPORT

To: Board of Commissioners
From: Chris Martin, Planning Director
Date: February 3rd, 2026
Subject: Case 26-01 Rezoning RR to RU at 102 Catalina Ct.
Parcel(s): 72694

Summary Statement: Michael Myers is requesting to re-zone 102 Catalina Court, a 4.34-acre parcel, from Restricted Residential to Rural Residential for access to the uses provided within said district.

Review: This property lies on the southeastern corner of Biggers Lake Road and Catalina Court. It is located approximately one quarter mile east of the Patterson Springs town limit. The surrounding uses consist primarily of residential mixed with some agricultural uses on larger lots. The surrounding zoning districts are Restricted Residential on the eastern side of Biggers Lake Road and Residential on the western side of the road. The Land Use Plan designates this area as Secondary Growth Area.

Services

- Utilities: Cleveland County Water
- Fire District: Number 3

Current Zoning: RR—Restricted Residential

- Single-family detached dwellings and modular homes at a maximum density of two (2) dwelling units per acre.
- Limited non-residential and Agricultural uses.

Requested Zoning District: RU—Rural Residential

- Single-family detached dwellings, modular homes, and manufactured homes at a maximum density of one (1) dwelling unit per acre. Garage and storage as primary use.
- Promotes agricultural uses and agricultural supporting commercial uses that help preserve the rural character, natural resources, and scenic views of the surrounding area.

Consistency Statement:

NCGS 160D-605 requires that local government boards adopt a consistency statement showing that the decision it makes fits in with the land use plan or if not, is reasonable and has a public interest.

Planning Board: The planning board unanimously recommended approval because the requested district fits within the Land Use Plan designation of Secondary Growth and it maintains the rural character of the area.

Requested Board Action: Approve or deny the request.

COUNTY OF CLEVELAND, NORTH CAROLINA

AGENDA ITEM SUMMARY

Sanitary District Board

Department:

Agenda Title: Sanitary District Board

Agenda Summary: Jonathan Sink, County Attorney

Proposed Action:

ATTACHMENTS:

File Name	Description
<input type="checkbox"/> Cleveland_Water_Vacant_Seat_Dewey_Cook_Recommendation_011526.pdf	Recommendation Staff Report



PO Box 8, Shelby, NC 28151
Telephone: (704) 466-3696 Fax: (704) 466-3245

1/14/2026

Mr. Kevin Gordon, Chairman
Cleveland County Board of Commissioners
PO Box 1210
Shelby, NC 28151

RE: Recommended appointment to Sanitary District Board

Dear Mr. Gordon,

As you are aware, the Cleveland County Water Board of Commissioners was left with a vacancy after the last election due to the passing of our long time Chairman, Don Melton. NCGS 130A-54 states that *any vacancy in a sanitary district board shall be filled by the county commissioners until the next election for sanitary district board members.*

Like past vacancies on our board, we took the lead on advertising the vacancy and requesting letters of interest to fill the vacant seat with the requirements that they live within the sanitary district boundaries and that they be a registered voter. We received four letters of interest. Upon review of the interested parties, the CCW Board of Commissioners voted unanimously at our January 13, 2026, meeting to nominate/recommend to the Board of County Commissioners that the vacant seat be filled by Dewey C. Cook. Mr. Cook is the retired Emergency Management Director/Fire Marshall for Cleveland County with 30+ years of experience. He has also been a past CCW Commissioner serving for 24 consecutive years from December 1999 through December 2023. As you can see, Mr. Cook has vast knowledge of our system and operations that will be valuable to our success as a governing body and unit of local government.

We would respectfully recommend the appointment of Mr. Dewey C. Cook to fill the vacancy on the Cleveland County Water Board of Commissioners.

Respectfully,

Bill Cameron

Bill Cameron
Chairman, CCW Board of Commissioners

Cc: CCW Board of Commissioners
CCW General Manager
County Manager

COUNTY OF CLEVELAND, NORTH CAROLINA

AGENDA ITEM SUMMARY

Board of Adjustment

Department:

Agenda Title: Board of Adjustment

Agenda Summary: Phyllis Nowlen, Clerk to the Board

Proposed Action:

ATTACHMENTS:

File Name

Description

No Attachments Available

COUNTY OF CLEVELAND, NORTH CAROLINA

AGENDA ITEM SUMMARY

Planning Board

Department:

Agenda Title: Planning Board

Agenda Summary: Phyllis Nowlen, Clerk to the Board

Proposed Action:

ATTACHMENTS:

File Name

Description

No Attachments Available

COUNTY OF CLEVELAND, NORTH CAROLINA

AGENDA ITEM SUMMARY

The next meeting of the Cleveland County Board of Commissioners will be held on Tuesday, March 17, 2026, at 6:00 p.m. in the Commissioners' Chambers.

Department:

Agenda Title: The next meeting of the Cleveland County Board of Commissioners will be held on Tuesday, March 17, 2026, at 6:00 p.m. in the Commissioners' Chambers.

Agenda Summary:

Proposed Action:

ATTACHMENTS:

File Name

Description

No Attachments Available