

**GRANT PROJECT ORDINANCE**

**WHEREAS,** Mecklenburg County is applying to the US Department of Health and Human Services Health Resources & Services Administration (HRSA) for a continuation of the Ending the HIV Epidemic A Plan: Ryan White HIV/AIDS Program Parts A and B funding to Mecklenburg County under the Grant Application HIV Epidemic A Plan: Ryan White HIV/AIDS Program Parts A and B up to the amount of \$16,832,000.00; and

**WHEREAS,** the grant funds will be used to fund the counties in the Charlotte-Gastonia Transitional Grant Area (TGA): Anson, Cabarrus, Gaston, Mecklenburg and Union Counties in NC and York County in SC.

**WHEREAS,** the Mecklenburg County Board of County Commissioners deems this activity to be a worthy and desirable undertaking;

**NOW, THEREFORE, PURSUANT TO N.C.G.S. 159-13.2, BE IT ORDAINED BY THE MECKLENBURG COUNTY BOARD OF COUNTY COMMISSIONERS that:**

Section 1. The project described in the **US Department of Health and Human Services Health Resources & Services Administration** grant application is hereby authorized to be undertaken for the duration of the grant.

Section 2. The County Manager is authorized to execute the grant agreement and other documents that are required or appropriated for the County to receive the **HIV Epidemic A Plan: Ryan White HIV/AIDS Program Parts A and B** and to undertake the project. The County Manager is directed to take steps necessary to ensure compliance with all spending and reporting requirements **US Department of Health and Human Services Health Resources & Services Administration**

Section 3. The following revenues are anticipated for Mecklenburg County in the (list fund) to complete this project:

**HIV Epidemic A Plan: Ryan White HIV/AIDS Program Parts A and B (Health) Grant \$16,832,000**

Section 4. The following expenses are appropriated in the Mecklenburg County General Fund (G001) to complete this project:

**HIV Epidemic A Plan: Ryan White HIV/AIDS Program Parts A and B (Health) Grant \$16,832,000**

Adopted this \_\_\_\_\_ day of \_\_\_\_\_

\_\_\_\_\_  
Clerk to the Board