

GREENE COUNTY COMBINED HEALTH DISTRICT

GREENE COUNTY, OHIO

AUDIT REPORT

For the Year Ended December 31, 2010

Charles E. Harris and Associates, Inc.
Certified Public Accountants and Government Consultants



Dave Yost • Auditor of State

Board of Directors
Greene County Combined Health District
360 Wilson Drive
P.O. Box 250
Xenia, Ohio 45385

We have reviewed the *Report of Independent Accountants* of the Greene County Combined Health District, Greene County, prepared by Charles E. Harris & Associates, Inc., for the audit period January 1, 2010 through December 31, 2010. Based upon this review, we have accepted these reports in lieu of the audit required by Section 117.11, Revised Code. The Auditor of State did not audit the accompanying financial statements and, accordingly, we are unable to express, and do not express an opinion on them.

Our review was made in reference to the applicable sections of legislative criteria, as reflected by the Ohio Constitution, and the Revised Code, policies, procedures and guidelines of the Auditor of State, regulations and grant requirements. The Greene County Combined Health District is responsible for compliance with these laws and regulations.

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Dave Yost
Auditor of State

June 15, 2011

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**GREENE COUNTY COMBINED HEALTH DISTRICT
GREENE COUNTY**

**AUDIT REPORT
FOR THE YEAR ENDED DECEMBER 31, 2010**

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Charles E. Harris & Associates, Inc.
Certified Public Accountants

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REPORT OF INDEPENDENT ACCOUNTANTS

Greene County Combined Health District
360 Wilson Drive
P.O. Box 250
Xenia, Ohio 45385

To the Board:

We have audited the accompanying financial statements of the governmental activities, each major fund and the aggregate remaining fund information of the Greene County Combined Health District (the District), as of and for the year ended December 31, 2010, which collectively comprise the District's basic financial statements as listed in the table of contents. These financial statements are the responsibility of the District's management. Our responsibility is to express an opinion on these financial statements based on our audit.

We conducted our audit in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the basic financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the basic financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audit provides a reasonable basis for our opinion.

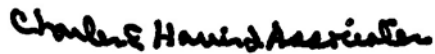
As discussed in Note 2, the accompanying financial statements and notes follow the cash accounting basis. This is a comprehensive accounting basis other than accounting principles generally accepted in the United States of America.

In our opinion, the basic financial statements referred to above present fairly, in all material respects, the respective financial position of the governmental activities, each major fund and the aggregate remaining fund information of the District as of December 31, 2010, and the respective changes in cash basis financial position and the respective budgetary comparison for the General Fund and each major special revenue fund thereof for the year then ended in conformity with accounting basis Note 2 describes.

The management's discussion and analysis on pages 3 to 6 is not a required part of the basic financial statements, but is supplementary information the Governmental Accounting Standards Board requires. We have applied certain limited procedures, which consisted principally of inquiries of management regarding the methods of measurement and presentation of the required supplementary information. However, we did not audit the information and express no opinion on it.

In accordance with *Government Auditing Standards*, we have also issued our report dated May 4, 2011 on our consideration of the District's internal control over financial reporting and our tests of its compliance with certain provisions of laws, regulations, contracts, grant agreements and other matters. While we did not opine on the internal control over financial reporting or on compliance, that report describes the scope of our testing of internal control over financial reporting and compliance and results of that testing. That report is an integral part of an audit performed in accordance with *Government Auditing Standards*. You should read it in conjunction with this report in assessing the results of our audit.

Our audit was conducted for the purpose of forming opinions on the financial statements that collectively comprise the District's basic financial statements. The accompanying schedule of expenditures of federal awards is presented for purposes of additional analysis as required by U.S. Office of Management and Budget Circular A-133, *Audits of States, Local Governments, and Non-Profit Organizations*, and is not a required part of the basic financial statements of the District. Such information has been subjected to the auditing procedures applied in the audit of the basic financial statements and, in our opinion, is fairly stated, in all material respects, in relation to the basic financial statements taken as a whole.

A handwritten signature in black ink that reads "Charles E. Harris Associates". The signature is written in a cursive, slightly slanted style.

Charles E. Harris & Associates, Inc.
May 4, 2011

**GREENE COUNTY COMBINED HEALTH DISTRICT
GREENE COUNTY**

**MANAGEMENT'S DISCUSSION AND ANALYSIS
FOR THE YEAR ENDED DECEMBER 31, 2010
(UNAUDITED)**

This discussion and analysis of the Greene County Combined Health District's (the District) financial performance provides an overall review of the financial activities for the year ended December 31, 2010 within the limits of the District's cash basis accounting. Readers should also review the basic financial statements and notes to enhance their understanding of the District's financial performance.

Highlights

Key highlights for 2010 are as follows:

- Total net assets increased by \$296,252 during 2010.
- Most of the District's revenue was associated with intergovernmental funding, from local, state and federal sources.

Using the Basic Financial Statements

This annual report is presented in a format consistent with the presentation requirements of Governmental Accounting Standards Board Statement No. 34, as applicable to the District's cash basis of accounting.

Report Components

The statement of net assets and the statement of activities provide information about District's cash position and the changes in cash position at the entity wide level. The statement of cash basis assets and fund balances and the statement of cash receipts, disbursements and changes in cash basis fund balances report the District's cash position and the changes in cash position by major fund. The statements of cash receipts, disbursements and changes in cash basis fund balance budget-and-actual-budget basis provides original and final budgeted amounts, with variances reflecting comparison of final budgeted amounts with actual receipts and expenditures. The notes to the financial statements are an integral part of the financial statements and provide expanded explanation and detail regarding the information reported in the statements.

Basis of Accounting

The basis of accounting is a set of guidelines that determine when financial events are recorded. These financial statements follow the cash basis of accounting.

The District has elected to present its financial statements on a cash basis of accounting. This basis of accounting is a basis of accounting other than generally accepted accounting principles. Under the District's cash basis of accounting, receipts are recognized when received (in cash), rather than when earned, and disbursements when paid, rather than when a liability is incurred.

As a result of using the cash basis of accounting, certain assets and their related revenues (such as accounts receivables) are not recorded in the financial statements. Therefore, when reviewing the financial information and discussion within this report, the reader must keep in mind the limitations resulting from the use of the cash basis of accounting.

Reporting the Government as a Whole

The statement of net assets and the statement of activities reflect how the District did financially during 2010 within the limits of cash basis accounting. The statement of net assets presents the cash balances of the District at year end. The statement of activities presents the revenue and disbursement activity during 2010.

Table 1 provides a summary of the District's net assets for 2010 compared to 2009.

**GREENE COUNTY COMBINED HEALTH DISTRICT
GREENE COUNTY**

**MANAGEMENT'S DISCUSSION AND ANALYSIS
FOR THE YEAR ENDED DECEMBER 31, 2010
(UNAUDITED)**

**TABLE 1
NET ASSETS
DECEMBER 31, 2010**

	Governmental Activities <u>2010</u>	Governmental Activities <u>2009</u>
Assets:		
Equity in Pooled Cash and Cash Equivalents	\$ <u>2,614,666</u>	\$ <u>2,318,414</u>
Total Assets	\$ <u>2,614,666</u>	\$ <u>2,318,414</u>
Net Assets:		
Restricted for:		
Other Purposes	\$ 2,598,037	2,318,156
Unrestricted	<u>16,629</u>	<u>258</u>
Total Net Assets	\$ <u>2,614,666</u>	\$ <u>2,318,414</u>

As mentioned previously, net assets increased by \$296,252 during 2010. The increase was primarily associated with funds restricted for specific grants and programs.

FUND FINANCIAL STATEMENTS REPORTING MAJOR FUNDS

The major funds of the District include the General Health Fund, Clinic Health Services Fund, Environmental/Plumbing Inspection Fund, and Food Service Operations Fund. The statement of cash basis, assets and fund balances and the statement of cash receipts, disbursements and changes in cash basis fund balances report the District's cash position and the changes in cash position by major fund. Keeping the limitations of the cash basis of accounting, you can think of these changes as one way to measure the District's financial strength. Over time, increases or decreases in the District's cash position is one indicator of the District's financial strength is improving or deteriorating. When evaluating the District's financial condition, you should also consider other financial factors such as the reliance on non-local financial resources for operations and the need for continued growth in other local revenue sources.

Table 2 reflects the changes in net assets during 2010.

**GREENE COUNTY COMBINED HEALTH DISTRICT
GREENE COUNTY**

**MANAGEMENT'S DISCUSSION AND ANALYSIS
FOR THE YEAR ENDED DECEMBER 31, 2010
(UNAUDITED)**

**TABLE 2
CHANGE IN NET ASSETS**

	Governmental Activities <u>2010</u>	Governmental Activities <u>2009</u>
Receipts:		
Program Receipts:		
Charges for Services	\$ 1,623,002	\$ 1,621,204
Operating Grants	1,643,893	1,241,592
General Receipts:		
Property and Other Local Taxes	1,540,027	1,519,107
Subdivision Fees	121,970	121,970
Unrestricted Grants	325,288	242,267
Miscellaneous	78,184	119,810
Total Receipts	<u>5,332,364</u>	<u>4,865,950</u>
Disbursements:		
Public Health Services	5,036,112	5,034,964
Total Disbursements	<u>5,036,112</u>	<u>5,034,964</u>
Net Change in Net Assets	<u>296,252</u>	<u>(169,014)</u>
Net Assets, Beginning of Year	2,318,414	2,487,428
Net Assets, End of Year	<u>\$ 2,614,666</u>	<u>\$ 2,318,414</u>

During 2010 the District's disbursements remained relatively the same, whereas revenues increased by 9.6 percent.

The District relies on diverse revenue streams to provide services to County residents. The District receives tax revenue generated from .5 mill property tax levy assessment and relies on intergovernmental revenue provided through federal, state and local grants. The largest category of disbursements was Salaries and related benefits. The District employs approximately 63 full-time employees.

BUDGETARY HIGHLIGHTS

The District made numerous revisions to the original appropriation approved by the Board and the Board's fiscal agent, the Greene County Budget Commission. Overall, these changes resulted in little significant change in the fund balance. During 2010, the District spent 100% of the amount appropriated in the General Fund. The District's 2010 financial statements include budgetary statements for the General Fund, Clinic Health Services Fund (CHS), Environmental Health Plumbing/Inspection and Food Service/Operations Fund.

CAPITAL ASSETS AND DEBT ADMINISTRATION

Capital Assets

The District currently tracks its capital assets. However, since the financial statements are presented on a cash basis, none of these assets are reflected on the District's financial statements. Instead, the acquisitions of property, plant and equipment are recorded as disbursements when paid.

Debt

The District has no debt obligations.

**GREENE COUNTY COMBINED HEALTH DISTRICT
GREENE COUNTY**

**MANAGEMENT'S DISCUSSION AND ANALYSIS
FOR THE YEAR ENDED DECEMBER 31, 2010
(UNAUDITED)**

CONTACTING THE DISTRICT'S FINANCIAL MANAGEMENT

This financial report is designed to provide our citizens, taxpayers, investors, and creditors with a general overview of the District's finances and to reflect the District's accountability for the monies it received.

Questions concerning any of the information in this report or requests for additional information should be directed to:

Aloysius O. Onuoha, BS, MBA, MHA,
Director, Administrative Services
Greene County Combined Health District
Xenia, OH 45385
Phone Number (937) 374-5628

GREENE COUNTY COMBINED HEALTH DISTRICT
GREENE COUNTY

STATEMENT OF NET ASSETS - CASH BASIS
For the Year Ended December 31, 2010

	<u>Governmental Activities</u>
<u>Assets</u>	
Equity in Pooled Cash and Cash Equivalents	\$ 2,614,666
Total Net Assets	<u>2,614,666</u>
<u>Net Assets</u>	
Restricted For:	
Other Purposes	2,598,037
Unrestricted	16,629
Total Net Assets	<u>\$ 2,614,666</u>

See accompanying notes to the basic financial statements.

GREENE COUNTY COMBINED HEALTH DISTRICT
GREENE COUNTY

STATEMENT OF ACTIVITIES - CASH BASIS
For the Year Ended December 31, 2010

	<u>Program Cash Receipts</u>			
	<u>Cash Disbursements</u>	<u>Charges for Services</u>	<u>Operating Grants and Contributions</u>	<u>Net (Disbursements) Receipts and Changes in Net Assets</u>
Governmental Activities				
Public Health Services	<u>\$ 5,036,112</u>	<u>\$ 1,623,002</u>	<u>\$ 1,643,893</u>	<u>\$ (1,769,217)</u>
		<u>General Receipts:</u>		
				1,540,027
				121,970
				325,288
				<u>78,184</u>
			Total General Receipts	<u>2,065,469</u>
			Net Change in Assets	296,252
			Net Assets Beginning of Year	<u>2,318,414</u>
			Net Assets End of Year	<u><u>\$ 2,614,666</u></u>

See accompanying notes to the basic financial statements.

GREENE COUNTY COMBINED HEALTH DISTRICT
GREENE COUNTY
COMBINED STATEMENT OF CASH BASIS ASSETS AND FUND BALANCES
GOVERNMENTAL FUNDS
For the Year Ended December 31, 2010

	<u>General</u>	<u>Clinic Health Services Fund</u>	<u>Environmental Plumbing/ Inspection Fund</u>	<u>Food Service Operations Fund</u>	<u>Other Governmental Funds</u>	<u>Total Governmental Funds</u>
Assets						
Equity in Pooled Cash and Cash Equivalents	\$ 16,629	\$ 1,238,038	\$ 94,732	\$ 196,431	\$ 1,068,836	\$ 2,614,666
Total Assets	<u>\$ 16,629</u>	<u>\$ 1,238,038</u>	<u>\$ 94,732</u>	<u>\$ 196,431</u>	<u>\$ 1,068,836</u>	<u>\$ 2,614,666</u>
Fund Balances						
Reserved:						
Reserved For Encumbrances	\$ -	\$ 1,726	\$ 1,000	\$ 300	\$ 24,403	\$ 27,429
Unreserved:						
Undesignated (Deficit) Report In:						
General Fund	16,629	-	-	-	-	16,629
Special Revenue Funds	-	1,236,312	93,732	196,131	1,044,433	2,570,608
Total Fund Balances	<u>\$ 16,629</u>	<u>\$ 1,238,038</u>	<u>\$ 94,732</u>	<u>\$ 196,431</u>	<u>\$ 1,068,836</u>	<u>\$ 2,614,666</u>

See accompanying notes to the basic financial statements.

GREENE COUNTY COMBINED HEALTH DISTRICT
GREENE COUNTY

COMBINED STATEMENT OF CASH RECEIPTS, DISBURSEMENTS, AND
CHANGES IN CASH FUND BALANCES
GOVERNMENTAL FUNDS
For the Year Ended December 31, 2010

	General	Clinic Health Services Fund	Environmental Plumbing/ Inspection Fund	Food Service Operations Fund	Other Governmental Funds	Total Governmental Funds
RECEIPTS						
Property and Other Local Taxes	\$ 1,540,027	-	-	-	-	\$ 1,540,027
Subdivision fees	121,970	-	-	-	-	121,970
Fees, Licenses & Permits	162,688	\$ 160,910	\$ 315,662	\$ 352,003	\$ 398,081	1,389,344
Contractual Services	233,658	-	-	-	-	233,658
Federal Grants	-	-	-	-	1,304,424	1,304,424
State Grants	225,462	-	-	-	99,826	325,288
Foundation Grants	-	-	-	-	171,518	171,518
Local Grants	-	-	-	-	31,046	31,046
Other Grants	58,629	75,786	-	-	2,490	136,905
Miscellaneous	65,542	1,290	402	310	10,640	78,184
Total Receipts	<u>2,407,976</u>	<u>237,986</u>	<u>316,064</u>	<u>352,313</u>	<u>2,018,025</u>	<u>5,332,364</u>
DISBURSEMENTS						
Current:						
Public Health Services						
Salaries	652,405	383,164	268,028	259,744	1,295,269	2,858,610
Materials & Supplies	29,678	73,490	8,011	9,286	123,143	243,608
Remittance to State	90,672	-	1,550	22,130	90,433	204,785
Equipment and Vehicles	111,977	1,966	70	16,125	155,308	285,446
Contracts - Repairs	3,264	-	1,947	351	2,082	7,644
Contracts - Services	35,758	27,609	4,051	1,977	122,618	192,013
Rentals (Facilities/Lease Agreements)	1,822	-	-	-	3,434	5,256
Travel and Training	10,707	6,749	1,169	2,286	16,095	37,006
Advertising and Printing	2,957	3,787	-	301	29,180	36,225
Public Employees' Retirement	97,234	55,998	41,178	38,667	195,270	428,347
Worker's Compensation	14,134	6,855	6,490	5,035	30,380	62,894
Utilities	7,830	1,807	7,388	1,645	10,302	28,972
Insurance	89,769	45,953	50,739	52,594	180,119	419,174
Other	27,548	7,370	7,137	3,018	181,059	226,132
Total Disbursements	<u>1,175,755</u>	<u>614,748</u>	<u>397,758</u>	<u>413,159</u>	<u>2,434,692</u>	<u>5,036,112</u>
Excess of Receipts Over (Under) Disbursements	<u>1,232,221</u>	<u>(376,762)</u>	<u>(81,694)</u>	<u>(60,846)</u>	<u>(416,667)</u>	<u>296,252</u>
Other Financing Sources (Uses)						
Transfers In	-	370,000	80,000	-	584,600	1,034,600
Transfers Out	(1,034,600)	-	-	-	-	(1,034,600)
Advances In	1,123,800	1,155,050	-	-	150,000	2,428,850
Advances Out	(1,305,050)	(1,073,800)	-	-	(50,000)	(2,428,850)
Total Other Financing Sources (Uses)	<u>(1,215,850)</u>	<u>451,250</u>	<u>80,000</u>	<u>-</u>	<u>684,600</u>	<u>-</u>
Net Change in Fund Balances	16,371	74,488	(1,694)	(60,846)	267,933	296,252
Fund Balances Beginning of Year	<u>258</u>	<u>1,163,550</u>	<u>96,426</u>	<u>257,277</u>	<u>800,903</u>	<u>2,318,414</u>
Fund Balances End of Year	<u>\$ 16,629</u>	<u>\$ 1,238,038</u>	<u>\$ 94,732</u>	<u>\$ 196,431</u>	<u>\$ 1,068,836</u>	<u>\$ 2,614,666</u>

See accompanying notes to the basic financial statements.

GREENE COUNTY COMBINED HEALTH DISTRICT
GREENE COUNTY

STATEMENT OF CASH RECEIPTS, DISBURSEMENTS AND CHANGES IN CASH BASIS
FUND BALANCE - BUDGET AND ACTUAL - BUDGET BASIS
GENERAL FUND

For the Year Ended December 31, 2010

	<u>Budgeted Amounts</u>		<u>Actual</u>	<u>Variance with Final Budget Positive (Negative)</u>
	<u>Original</u>	<u>Final</u>		
RECEIPTS				
State Grants	\$ 43,229	\$ 225,462	\$ 225,462	\$ -
Subdivision Fees	121,970	121,970	121,970	-
Tax Levies	1,654,679	1,540,027	1,540,027	-
Licenses, Permits, & Fees	151,000	162,688	162,688	-
Contractual Services	233,658	233,658	233,658	-
Other Grants	70,000	58,629	58,629	-
Miscellaneous	2,000	65,542	65,542	-
Total Receipts	<u>2,276,536</u>	<u>2,407,976</u>	<u>2,407,976</u>	<u>-</u>
DISBURSEMENTS				
Current:				
Public Health Services				
Salaries	635,044	652,405	652,405	-
Materials & Supplies	26,021	29,678	29,678	-
Remittance to State	80,000	90,672	90,672	-
Equipment and Vehicles	65,200	111,977	111,977	-
Contracts - Repairs	5,100	3,264	3,264	-
Contracts - Services	40,000	35,758	35,758	-
Travel and Training	14,000	10,707	10,707	-
Advertising and Printing	6,000	2,957	2,957	-
Public Employees' Retirement	88,906	97,234	97,234	-
Worker's Compensation	12,701	14,134	14,134	-
Utilities	10,000	7,830	7,830	-
Insurance	88,329	89,769	89,769	-
Other	59,208	29,370	29,370	-
Total Disbursements	<u>1,130,509</u>	<u>1,175,755</u>	<u>1,175,755</u>	<u>-</u>
Excess of Receipts Over (Under) Disbursements	1,146,027	1,232,221	1,232,221	-
Other Financing Sources (Uses)				
Transfers Out	(1,146,027)	(1,034,600)	(1,034,600)	-
Advances In	1,025,000	1,123,800	1,123,800	-
Advances Out	(1,025,000)	(1,305,050)	(1,305,050)	-
Total Other Financing Sources (Uses)	<u>(1,146,027)</u>	<u>(1,215,850)</u>	<u>(1,215,850)</u>	<u>-</u>
Net Change in Fund Balances	-	16,371	16,371	-
Fund Balances Beginning of Year	<u>258</u>	<u>258</u>	<u>258</u>	<u>-</u>
Fund Balances End of Year	<u>\$ 258</u>	<u>\$ 16,629</u>	<u>\$ 16,629</u>	<u>\$ -</u>

See accompanying notes to the basic financial statements.

GREENE COUNTY COMBINED HEALTH DISTRICT
GREENE COUNTY

STATEMENT OF CASH RECEIPTS, DISBURSEMENTS AND CHANGES IN CASH BASIS
FUND BALANCE - BUDGET AND ACTUAL - BUDGET BASIS
CLINIC HEALTH SERVICES FUND
For the Year Ended December 31, 2010

	<u>Budgeted Amounts</u>			Variance with Final Budget Positive (Negative)
	<u>Original</u>	<u>Final</u>	<u>Actual</u>	<u>(Negative)</u>
RECEIPTS				
Federal Grants	\$ -	\$ -	\$ -	\$ -
Other Grants	74,741	74,741	75,786	1,045
Licenses, Permits, & Fees	190,000	175,000	160,910	(14,090)
Miscellaneous	-	-	1,290	1,290
Total Receipts	<u>264,741</u>	<u>249,741</u>	<u>237,986</u>	<u>(11,755)</u>
DISBURSEMENTS				
Current:				
Public Health Services				
Salaries	337,039	418,189	383,164	35,025
Materials & Supplies	65,587	77,233	73,490	3,743
Equipment and Vehicles	6,000	2,100	1,966	134
Contracts - Services	38,436	36,506	29,335	7,171
Travel and Training	6,600	8,600	6,749	1,851
Advertising and Printing	1,725	5,225	3,787	1,438
Public Employees' Retirement	47,185	56,802	55,998	804
Worker's Compensation	5,741	6,855	6,855	-
Utilities	3,000	3,000	1,807	1,193
Insurance	67,984	62,479	45,953	16,526
Other	6,387	8,567	7,370	1,197
Total Disbursements	<u>585,684</u>	<u>685,556</u>	<u>616,474</u>	<u>69,082</u>
Excess of Receipts Over (Under) Disbursements	(320,943)	(435,815)	(378,488)	57,327
Other Financing Sources (Uses)				
Transfers In	276,806	360,000	370,000	10,000
Advances In	1,073,800	1,073,800	1,155,050	81,250
Advances Out	(1,073,800)	(1,073,800)	(1,073,800)	-
Total Other Financing Sources (Uses)	<u>276,806</u>	<u>360,000</u>	<u>451,250</u>	<u>91,250</u>
Net Change in Fund Balances	<u>(44,137)</u>	<u>(75,815)</u>	<u>72,762</u>	<u>148,577</u>
Fund Balances Beginning of Year	1,156,009	1,156,009	1,156,009	-
Prior Year Encumbrances Appropriated	7,541	7,541	7,541	-
Fund Balances End of Year	<u>\$ 1,119,413</u>	<u>\$ 1,087,735</u>	<u>\$ 1,236,312</u>	<u>\$ 148,577</u>

See accompanying notes to the basic financial statements.

GREENE COUNTY COMBINED HEALTH DISTRICT
GREENE COUNTY

STATEMENT OF CASH RECEIPTS, DISBURSEMENTS AND CHANGES IN CASH BASIS
FUND BALANCE - BUDGET AND ACTUAL - BUDGET BASIS
ENVIRONMENTAL PLUMBING AND INSPECTION FUND
For the Year Ended December 31, 2010

	<u>Budgeted Amounts</u>			Variance with Final Budget Positive (Negative)
	<u>Original</u>	<u>Final</u>	<u>Actual</u>	
RECEIPTS				
Licenses, Permits, & Fees	\$ 245,000	\$ 306,649	\$ 315,662	\$ 9,013
Miscellaneous	-	-	402	402
Total Receipts	<u>245,000</u>	<u>306,649</u>	<u>316,064</u>	<u>9,415</u>
DISBURSEMENTS				
Salaries	265,203	268,029	268,028	1
Materials & Supplies	8,000	9,714	8,011	1,703
Remittance to State	1,550	1,550	1,550	-
Equipment and Vehicles	5,080	180	70	110
Contracts - Repair	1,250	2,400	1,947	453
Contracts - Services	7,200	6,950	4,051	2,899
Travel and Training	2,500	3,300	1,169	2,131
Advertising and Printing	1,800	184	-	184
Public Employees' Retirement	37,128	44,000	41,178	2,822
Worker's Compensation	5,304	6,490	6,490	-
Utilities	9,600	8,400	7,388	1,012
Insurance	57,101	54,219	50,739	3,480
Other	6,795	9,695	8,137	1,558
Total Disbursements	<u>408,511</u>	<u>415,111</u>	<u>398,758</u>	<u>16,353</u>
Excess of Receipts Over (Under) Disbursements	(163,511)	(108,462)	(82,694)	25,768
TRANSFERS IN	<u>208,245</u>	<u>130,245</u>	<u>80,000</u>	<u>50,245</u>
NET CHANGE IN FUND BALANCE	44,734	21,783	(2,694)	23,475
Fund Balances Beginning of Year	94,300	94,300	94,300	-
Prior Year Encumbrances Appropriated	<u>2,126</u>	<u>2,126</u>	<u>2,126</u>	<u>-</u>
Fund Balances End of Year	<u>\$ 141,160</u>	<u>\$ 118,209</u>	<u>\$ 93,732</u>	<u>\$ 23,475</u>

See accompanying notes to the basic financial statements.

GREENE COUNTY COMBINED HEALTH DISTRICT
GREENE COUNTY

STATEMENT OF CASH RECEIPTS, DISBURSEMENTS AND CHANGES IN CASH BASIS
FUND BALANCE - BUDGET AND ACTUAL - BUDGET BASIS
FOOD SERVICE OPERATIONS FUND
For the Year Ended December 31, 2010

	<u>Budgeted Amounts</u>			Variance with Final Budget Positive (Negative)
	<u>Original</u>	<u>Final</u>	<u>Actual</u>	
RECEIPTS				
Licenses, Permits, & Fees	\$ 410,000	\$ 355,312	\$ 352,003	\$ (3,309)
Miscellaneous	-	-	310	310
Total Receipts	<u>410,000</u>	<u>355,312</u>	<u>352,313</u>	<u>(2,999)</u>
DISBURSEMENTS				
Salaries	273,329	273,329	259,744	13,585
Materials & Supplies	10,190	10,190	9,286	904
Remittance to State	25,000	25,000	22,130	2,870
Equipment and Vehicles	15,000	16,500	16,125	375
Contracts - Repair	1,000	1,000	351	649
Contracts - Services	2,200	2,500	1,977	523
Travel and Training	2,435	3,435	2,286	1,149
Advertising and Printing	500	500	301	199
Public Employees' Retirement	38,266	38,671	38,667	4
Worker's Compensation	5,467	5,467	5,035	432
Utilities	2,500	2,500	1,645	855
Insurance	59,763	60,066	52,594	7,472
Other	6,963	6,963	3,318	3,645
Total Disbursements	<u>442,613</u>	<u>446,121</u>	<u>413,459</u>	<u>32,662</u>
Excess of Receipts Over (Under) Disbursements	(32,613)	(90,809)	(61,146)	29,663
Fund Balances Beginning of Year	256,652	256,652	256,652	-
Prior Year Encumbrances Appropriated	625	625	625	-
Fund Balances End of Year	<u>\$ 224,664</u>	<u>\$ 166,468</u>	<u>\$ 196,131</u>	<u>\$ 29,663</u>

See accompanying notes to the basic financial statements.

**GREENE COUNTY COMBINED HEALTH DISTRICT
GREENE COUNTY**

**NOTES TO THE BASIC FINANCIAL STATEMENTS
DECEMBER 31, 2010**

1. DESCRIPTION OF THE COMBINED HEALTH DISTRICT AND REPORTING ENTITY

The constitution and laws of the State of Ohio establish the rights and privileges of the Greene County Combined Health District, (the District), as a body corporate and politic. A thirteen-member Board and Health Commissioner govern the District which provides health services in all of Greene County, including cities, villages, and townships.

Reporting Entity

A reporting entity is comprised of the primary government, component units and other organizations ensuring that the financial statements are not misleading. The primary government consists of all funds, departments, boards and agencies that are not legally separate from the District. They comprise the District's legal entity, which provides services associated with immunization, vital statistics, health related licenses and permits, disease prevention and control, and public health nursing.

The Greene County Commissioners are the taxing authority for the District. The Greene County Auditor and the Greene County Treasurer are responsible for fiscal control of the resources of the District.

The District's management believes the financial statements present all activities for which the District is financially accountable.

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

A. Basis of Presentation

These financial statements follow the cash basis of accounting. The District's Basic Financial Statements consists of government-wide statements, including a Statement of Net Assets and a Statement of Activities, and fund financial statements, which provide a more detailed level of financial information.

1. Government-Wide Financial Statements

The Statement of Net Assets and the Statement of Activities display information about the District as a whole. These statements include the financial activities of the primary government.

The Statement of Net Assets presents the financial condition of the governmental activities of the District at year-end. The Statement of Activities presents a comparison between direct expenses and program revenues for each program or function of the District's governmental activities. Direct expenses are those that are specifically associated with a service, program or department and therefore clearly identifiable to a particular function. Program receipts include charges paid by the recipient of the goods or services offered by the program and grants and contributions that are restricted to meeting the operational or capital requirements of a particular program. Receipts which are not classified as program receipts are presented as general receipts of the District, with certain limited exceptions. The comparison of direct expenses with program receipts identifies the extent to which each governmental program is self-financing or draws from the general receipts of the District.

2. Fund Financial Statements

During the year, the District segregates transactions related to certain District functions or activities in separate funds in order to aid financial management and to demonstrate legal compliance. Fund financial statements are designed to present financial information of the District at this more detailed level. The focus of governmental fund financial statements is on major funds. Each major fund is presented in a separate column. Non-major funds are aggregated and presented in a single column.

**GREENE COUNTY COMBINED HEALTH DISTRICT
GREENE COUNTY**

**NOTES TO THE BASIC FINANCIAL STATEMENTS
DECEMBER 31, 2010**

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

A. Basis of Presentation (Continued)

3. Fund Accounting

The District uses funds to maintain its financial records during the year. A fund is defined as a fiscal and accounting entity with a self-balancing set of accounts. The District utilizes the governmental category of funds.

Governmental Funds

Governmental funds are those through which all governmental functions of the District typically are financed. Governmental fund reporting focuses on the sources, uses, and balances of current financial resources. Expendable assets are assigned to the various governmental funds according to the purpose for which they may or must be used. The following are the District's major governmental funds:

General Fund – This fund accounts for all financial resources except those required to be accounted for in another fund. The General Fund balance is available to the District for any purpose provided it is expended or transferred according to the general laws of Ohio.

Clinic Health Services Fund – This fund is used to account for revenue received and expended for the following activities: Bureau for Children with Medical Handicaps (BCMh), health supervision, specialty clinics-hearing and vision, communicable disease, Aids/HIV prevention, welcome home program and other primary care programs.

Environmental Plumbing/Inspection Fund – This fund is used to account for revenue received and expended for the following program activities: Resident camps, trash and tank trucks, sewage disposal, demolition, housing, mosquito control, nuisance abatement, rabies control, tattoo parlors, plumbing, etc.

Food Service Operations Fund – This fund is used to account for revenue received and expended for the following components: the food service operations and the retail food establishment operations. Both programs are state mandated programs that assure the health and safety of all food operations patrons. Activities include periodic inspections as prescribed by law for restaurant, grocery stores, mobile food operations, temporary food operators and vending locations.

The other governmental funds of the District account for grants and other resources whose use is restricted for a particular purpose.

4. Measurement Focus

The District has elected to present its financial statements on a cash basis of accounting. This basis of accounting is a basis of accounting other than generally accepted accounting principles. Under the District's cash basis of accounting, receipts are recognized when received in cash, rather than when earned, and disbursements when paid, rather than when a liability is incurred.

5. Basis of Accounting

As a result of using the cash basis of accounting, certain assets and their related revenues (such as accounts receivable) and certain liabilities and their related expenses (such as accounts payable) are not recorded in the financial statements. Therefore, when reviewing the financial information and discussion within this report, the reader must keep in mind the limitations resulting from the use of the cash basis of accounting.

**GREENE COUNTY COMBINED HEALTH DISTRICT
GREENE COUNTY**

**NOTES TO THE BASIC FINANCIAL STATEMENTS
DECEMBER 31, 2010**

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

B. Cash

As required by Ohio Revised Code, the County Treasurer is custodian for the District's cash. The District's assets are held in the County's cash and investment pool, and are valued at the County Treasurer's reported carrying amount.

C. Capital Assets

Acquisitions of property, plant and equipment are recorded as disbursements when paid. Acquisitions of property are not reflected as an asset under the basis of accounting the District uses.

D. Long-term Debt Obligations

The District did not have any bonds or other long-term obligations.

E. Net Assets

These statements report restricted net assets when enabling legislation or creditors, grantors or laws or regulations of other governments have imposed limitations on their use.

The District first applies restricted resources when incurring disbursements for which it may use either restricted or unrestricted resources.

F. Budgetary Process

All funds are legally required to be budgeted and appropriated. The major documents prepared are the tax budget, the certificate of estimated resources, and the appropriation resolution, all of which are prepared on the budgetary basis of accounting. The budgetary basis reports expenditures when commitments are made (i.e. when an encumbrance is approved). The tax budget demonstrates a need for existing or increased tax rates. The certificate of estimated resources establishes a limit on the amount the District may appropriate. The appropriation resolution is the District's authorization to spend resources and sets annual limits on expenditures plus encumbrances at the level of control selected by the District. The legal level of budgetary control has been established by the District at the fund and object level.

The certificate of estimated resources may be amended during the year if projected increases or decreases in revenue are identified by the Director. The amounts reported as the original budgeted amounts on the budgetary statements reflect the amounts on the certificate of estimated resources when the original appropriations were adopted. The amounts reported as the final budgeted amounts on the budgetary statements reflect the amounts on the final amended certificate of estimated certificate of amended resources in effect at the time final appropriations were passed by District.

The appropriation resolution is subject to amendment throughout the year with the restriction that appropriations cannot exceed estimated resources. The amounts reported as the original budgeted amounts reflect the first appropriation resolution for that fund that covered the entire year, including amounts automatically carried forward from prior years. The amounts reported as the final budgeted amounts represent the final appropriation amounts passed by District during the year.

Budget versus actual statements for major funds are presented as part of the financial statements.

**GREENE COUNTY COMBINED HEALTH DISTRICT
GREENE COUNTY**

**NOTES TO THE BASIC FINANCIAL STATEMENTS
DECEMBER 31, 2010**

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

G. Accumulated Leave

In certain circumstances, such as upon leaving employment, employees are entitled to cash payment for unused leave. Unpaid leave is not reflected as liability under the basis of accounting the District uses.

3. BUDGETARY BASIS OF ACCOUNTING

The budgetary basis as provided by law is based upon accounting for certain transactions on the basis of cash receipts, disbursements, and encumbrances. The Statement of Cash Receipts, Disbursements and Changes in Cash Basis Fund Balance – Budget and Actual – Budget Basis presented for the General Fund, Clinic Health Services, Environmental Plumbing and Inspection and Food Service Operations funds are prepared on the budgetary basis to provide a meaningful comparison of actual results with the budget. The difference(s) between the budgetary basis and the cash basis is outstanding year end encumbrances are treated as cash disbursements (budgetary basis) rather than as a reservation of fund balance (cash basis). During 2010 the encumbrances outstanding at year end (budgetary basis) amounted to \$1,726 for the Clinic Health Services Fund, \$1,000 for the Environmental Plumbing Inspections Fund and \$300 for the Food Service Operations Fund.

4. CASH AND CASH EQUIVALENTS

The Greene County Commissioners maintain a cash pool used by all of the County’s funds, including those of the Combined Health District. The Ohio Revised Code prescribes allowable deposits and investments. At year-end, the carrying amount of the District’s deposits with the Greene County Commissioner was \$2,614,666. The Greene County Board of Commissioners, as the fiscal agent for the District, is responsible for maintaining adequate depository collateral for all funds in the County’s pooled cash and deposits accounts.

5. PROPERTY TAXES

The Greene County Commissioners serve as a special taxing authority to levy a special levy outside the property tax ten-mill limitation to provide the District with sufficient funds to carryout health programs and general operations. The County Commissioners have placed a countywide levy of .8 mills on the ballot that gained approval by the electors of the county.

6. INTERFUND BALANCES

Unpaid inter-fund cash advances at December 31, 2010 were as follows:

	Interfund Receivable	Interfund Payable
General Fund	\$1,307,551	\$ -0-
Clinic Health Services Fund	-0-	1,036,611
Other Governmental Funds	-0-	270.940
Total Interfund Receivables/Payables	<u>\$1,307,551</u>	<u>\$ 1,307,551</u>

**GREENE COUNTY COMBINED HEALTH DISTRICT
GREENE COUNTY**

**NOTES TO THE BASIC FINANCIAL STATEMENTS
DECEMBER 31, 2010**

7. INTERFUND TRANSFERS

Interfund cash transfers for the year ended December 31, 2010 were as follows:

	TRANSFER TO:			
TRANSFER FROM:	Clinic Health Services Fund	Environmental Plumbing/Insp Fund	Other Governmental Funds	Total Governmental Funds
General Fund	\$370,000	\$80,000	\$584,000	\$1,034,600
Totals	\$370,000	\$80,000	\$584,000	\$1,034,600

The District transferred cash for grant reimbursement purposes due to the timing of the receipt of grant monies.

8. RISK MANAGEMENT

The District belongs to the Public Entities Pool of Ohio (“PEP”), a risk-sharing pool available to Ohio local governments. PEP provides property and casualty insurance for its members. PEP is a member of the American Public Entity Excess Pool (APEEP). Member governments pay annual contributions to fund PEP. PEP pays judgments, settlements and other expenses resulting from covered claims that exceed the members’ deductibles.

Casualty Coverage

PEP retains casualty risks up to \$350,000 per occurrence, including loss adjustment expenses. PEP pays a percentage of its contributions to APEEP. APEEP reinsures claims exceeding \$350,000, up to \$2,650,000 per claim and \$10,000,000 in aggregate per year. Governments can elect additional coverage, from \$3,000,000 to \$13,000,000, from General Reinsurance Corporation.

If losses exhaust PEP’s retained earnings, APEEP covers PEP losses up to \$5,000,000 per year, subject to a per-claim limit of \$10,000,000.

Property Insurance

On January 1, 2005, APEEP began administering a risk-sharing property program. Under the new program, St. Paul Travelers will reinsure specific losses in excess of \$500,000 up to \$600,000,000 per occurrence. APEEP will reinsure members for specific losses in excess of \$150,000 up to \$500,000 per occurrence, subject to annual aggregate loss payment. St. Paul Travelers provides aggregate stop-loss coverage based upon the combined Members’ Total Insurable Value (TIV). If the stop-loss is reached by payment of losses between \$100,000 and \$250,000, St. Paul Travelers will then reinsure specific losses in excess of \$100,000 up to their \$600,000,000 per occurrence limit.

The aforementioned casualty and property reinsurance agreements do not discharge PEP’s primary liability for claims payments on covered losses. Claims exceeding coverage limits are the obligation of the respective government.

Financial Position

PEP’s financial statements (audited by other accountants) conform with generally accepted accounting principles, and reported the following assets, liabilities and retained earnings at December 31, 2009 (the latest information available):

**GREENE COUNTY COMBINED HEALTH DISTRICT
GREENE COUNTY**

**NOTES TO THE BASIC FINANCIAL STATEMENTS
DECEMBER 31, 2010**

8. RISK MANAGEMENT (Continued)

	<u>2009</u>	<u>2008</u>
Assets	\$36,374,898	\$ 35,769,535
Liabilities	<u>(15,256,862)</u>	<u>(15,310,206)</u>
Retained Earnings	<u>\$21,118,036</u>	<u>\$ 20,459,329</u>

At December 31, 2009 and 2008, respectively, the liabilities above include approximately \$14.1 million and \$13.8 of estimated incurred claims payable. The assets and retained earnings above include approximately \$13.7 million and \$12.9 million of unpaid claims to be billed to approximately 445 member governments in the future, as of December 31, 2009 and 2008, respectively. PEP will collect these amounts in the future annual premium billings when PEP's related liabilities are due for payment.

Based on discussion with PEP, the expected rates PEP charges to compute member contributions, which are used to pay claims as they become due, are not expected to change significantly from those used to determine the historical contributions detailed below. By contract, the annual liability of each member is limited to the amount of financial contributions required to be made to PEP each year of the membership.

Contributions to PEP

• 2008	\$ 27,467
• 2009	27,467
• 2010	27,702

Members may withdraw in each anniversary of the date they joined PEP. They must provide written notice to PEP 60 days in advance of their anniversary date. Upon withdrawal, members are eligible for a full or partial refund of their capital contribution, minus subsequent year's premium. Also, upon withdrawal, payments of all property and casualty claims and claims expenses become the sole responsibility of the withdrawing member, regardless of whether a claim was incurred or reported prior to the withdrawal.

Settled claims have not exceeded this commercial coverage in any of the last three years. There have been no significant reductions in insurance coverage from last year. The District also provides health insurance, dental, and vision coverage to full-time employees through a private carrier.

9. PENSION OBLIGATIONS

Plan Description

The District contributes to the Ohio Public Employees Retirement System of Ohio (OPERS), a cost sharing, multiple-employer public employee retirement system. OPERS provides retirement and disability benefits, annual cost of living adjustments, and death benefits to plan members and beneficiaries through three separate pension plans: The Traditional Pension Plan – a cost-sharing, multiple-employer defined benefit pension plan; The Member-Directed Plan – a defined contribution plan in which the member invests both member and employer contributions (employer contributions vest over five years at 20% per year). Under this plan, members accumulate retirement assets equal to the value of member and (vested) employer contributions plus any investment earnings; and the Combined Plan – a cost-sharing multiple-employer defined benefit pension plan. Under this plan, OPERS invests employer contributions to provide a formula retirement benefit similar in nature to the Traditional Pension Plan benefit. Member contributions, the investment of which is self-directed by the members, accumulate retirement assets in a manner similar to the Member-Directed Plan.

**GREENE COUNTY COMBINED HEALTH DISTRICT
GREENE COUNTY**

**NOTES TO THE BASIC FINANCIAL STATEMENTS
DECEMBER 31, 2010**

9. PENSION OBLIGATIONS (Continued)

Chapter 145 of the Ohio Revised Code assigns the District to establish and amend benefit provisions to the OPERS board of trustees (Board). OPERS issues a stand-alone financial report that includes the financial statements. That report may be obtained by writing to the Ohio Public Employees Retirement System, 277 East Town Street, Columbus, Ohio 43215-4642, or by calling 614-466-2085 or 1-800-222-PERS (7377).

Funding Policy

Plan members are required to contribute 10% percentage of their annual covered and the District is required to contribute an actuarially determined rate. The employer contribution rate was 14% of annual covered payroll. The District's contributions for pension obligations to the traditional, combined, and member-directed plans for the years ended December 31, 2010, 2009 and 2008 were \$428,347, \$448,942 and \$393,403, respectively. 100% of required contributions have made.

10. POSTEMPLOYMENT BENEFITS OTHER THAN PENSION BENEFITS

(a) *Plan Description*

Ohio Public Employees Retirement System (OPERS) administers three separate pension plans: The Traditional Pension Plan—a cost-sharing, multiple-employer defined benefit pension plan; the Member-Directed Plan—a defined contribution plan; and the Combined Plan—a cost sharing, multiple-employer defined benefit pension plan that has elements of both a defined benefit and defined contribution plan.

OPERS maintains a cost-sharing multiple employer defined benefit post-employment healthcare plan, which includes a medical plan, prescription drug program and Medicare Part B premium reimbursement, to qualifying members of both the Traditional Pension and the Combined Plans. Members of the Member-Directed Plan do not qualify for ancillary benefits, including post-employment health care coverage.

In order to qualify for post-employment health care coverage, age-and-service retirees under the Traditional Pension and Combined Plans must have 10 or more years of qualifying Ohio service credit. Health care coverage for disability benefit recipients and qualified survivor benefit recipients is available. The health care coverage provided by OPERS meets the definition of an Other Post Employment Benefit (OPEB) as described in GASB Statement 45.

The Ohio Revised Code permits, but does not mandate, OPERS to provide OPEB benefits to its eligible members and beneficiaries. Authority to establish and amend benefits is provided in Chapter 145 of the Ohio Revised Code.

OPERS issues a stand-alone financial report. Interested parties may obtain a copy by writing OPERS, 277 East Town Street, Columbus OH 43215-4642, or by calling 614-222-5601 or 800-222-7377.

(b) *Funding Policy*

The Ohio Revised Code provides the statutory authority requiring public employers to fund post retirement health care through their contributions to OPERS. A portion of each employer's contribution to OPERS is set aside for the funding of post retirement health care benefits.

Employer contribution rates are expressed as a percentage of the covered payroll of active members. In 2010, state and local employers contributed at a rate of 14.00% of covered payroll. The Ohio Revised Code currently limits the employer contribution to a rate not to exceed 14.0% of covered payroll for state and local employer units. Active members do not make contributions to the OPEB Plan.

**GREENE COUNTY COMBINED HEALTH DISTRICT
GREENE COUNTY**

**NOTES TO THE BASIC FINANCIAL STATEMENTS
DECEMBER 31, 2010**

10. PENSION OBLIGATIONS (Continued)

OPERS' Post Employment Health Care plan was established under, and is administrated in accordance with, Internal Revenue Code 401(h). Each year, the OPERS Board of Trustees determines the portion of the employer contribution rate that will be set aside for funding of post employment health care benefits. The portion of employer contributions allocated to health care for members in the Traditional Plan was 5.5% from January 1 through February 28, 2010 and 5.0% from March 1 through December 31, 2010. The portion of employer contributions allocated to health care for members in the Combined Plan was 4.73% from January 1 through February 28, 2010, and 4.23% from March 1 through December 31, 2010. The OPERS Board of Trustees is also authorized to establish rules for the payment of a portion of the health care benefits provided, by the retiree or their surviving beneficiaries. Payment amounts vary depending on the number of covered dependents and the coverage selected. The District's contributions for post-employment benefits were \$168,340, \$187,208 and \$196,207 for the years ended December 31, 2010, 2009 and 2008, respectively.

(c) *OPERS Retirement Board Implements its Health Care Preservation Plan*

The Health Care Preservation Plan (HCPP) adopted by the OPERS Board of Trustees September 9, 2004, was effective January 1, 2007. Member and employer contribution rates for state and local employers increased January 1 of each year from 2006 to 2008. Rates for law and public safety employers increased over a six year period beginning January 1, 2006, with a final rate increase January 1, 2011. These rate increases allowed additional funds to be allocated to the health care plan.

11. CONTINGENCIES

A. Litigation

The District may be a party to litigation. Although the outcome of the litigation is not presently determinable, management believes the resolution of these matters will not materially adversely affect the District's financial condition.

B. Grants

Amounts received from grantor agencies are subject to audit and adjustment by the grantor, principally the federal government. Any disallowed costs may require refunding to the grantor. Amounts which may be disallowed, if any, are not presently determinable. However, based on prior experience, management believes such refunds, if any, would not be material.

**GREENE COUNTY COMBINED HEALTH DISTRICT
GREENE COUNTY**

**NOTES TO THE BASIC FINANCIAL STATEMENTS
DECEMBER 31, 2010**

12. CONTRACTUAL COMMITMENTS

During the year-ended December 31, 2010, the District had \$176,861 in contractual commitments for services provided. Some of the following commitments were funded by federal and state programs.

<u>VENDORS/CONTRACTORS</u>	<u>AMOUNT</u>
Katherine Lin, MD	\$ 4,493
Dr. Dillaplain, MD	12,256
Cirrus Concept Contracting	9,368
Miami Valley Interpreters	806
Cannon Financial Services	6,681
WS Electronics	2,076
Staff Mark	11,726
Grays Security	499
Greene County Agricultural Society	350
Key Sports 5K	495
Greene County Parks & Rec	3,738
Diagnostic Medical Imaging	283
Jorge Ruiz	798
Encore Speaks	500
Community Mercy Outreach	29,748
CHC Software	2,080
Medical Waste Pick-Up	9,824
Compunet Labs	18,473
The Henderson Company	3,800
Tackett Environmental	280
Wright State University – Booth Rental	50
All Shine Cleaning Services	5,014
Dawns Hurst Legal Services	1,405
United Parcel Services	1,158
Terry Simons Lawn Service	1,660
Key Equipment Financing	2,381
Universal Medical Services Assoc.	472
Greene Radiology	3,669
Cintas Log Uniforms	3,999
Keith Watson, MD	4,243
James Bembry, MD	4,243
Anita Stanley	27,965
Office Pride Temp. Services	2,208
Family Service Interpreters	<u>120</u>
 TOTAL	 <u>\$ 176,861</u>

**GREENE COUNTY COMBINED HEALTH DISTRICT
GREENE COUNTY**

**SCHEDULE OF FEDERAL AWARDS EXPENDITURES
FOR THE YEAR ENDED DECEMBER 31, 2010**

Federal Grantor / Pass Through Grantor Program Title	Pass Through Entity Number	Federal CFDA Number	Disbursements
UNITED STATES DEPARTMENT OF AGRICULTURE			
Passed through Ohio Department of Health			
Special Supplemental Nutrition Program for Women, Infants & Children (WIC)	291001CL-10	10.557	\$ 427,331
	291001CL-11	10.557	139,917
Total United States Department of Agriculture			<u>567,248</u>
UNITED STATES DEPARTMENT OF TRANSPORTATION			
Passed through Ohio Department of Public Safety			
State and Community Highway Safety	29-000381-10	20.600	22,244
Total United States Department of Transportation			<u>22,244</u>
UNITED STATES DEPARTMENT OF HEALTH AND HUMAN SERVICES			
Passed through Ohio Department of Health			
Centers for Disease Control and Prevention - Investigation & Technical Assistance (Public Health Infrastructure)	29-1-001-2-B1-10	93.283	536,772
	29-1-001-2-B1-11	93.283	69,632
Total Centers for Disease Control and Prevention - Investigation & Technical Assistance			<u>606,404</u>
Centers For Disease Control & Prevention	29-1001-AZ-10	93.268	29,004
Preventive Health & Health Services Block Grant	29-1-001-2EE-09	93.991	561
Maternal & Child Health Services Block Grant	29-1-001-1-MC-10	93.994	59,223
	29-1-001-1-MC-11	93.994	19,740
Total Maternal & Child Health Services Block Grant			<u>78,963</u>
Healthy Obesity Grant	29-100140P01-09	93.522	1,046
Passed through Ohio Department of Health			
Passed through City of Portsmouth Board of Health			
HIV Prevention Activities - Health Department Based	263-440-5283-10	93.940	60,000
Total United States Department of Health and Human Services			<u>775,978</u>
Total Federal Assistance			<u>\$ 1,365,470</u>

See accompanying Notes to the Schedule of Federal Awards Expenditures.

**GREENE COUNTY COMBINED HEALTH DISTRICT
GREENE COUNTY**

**NOTES TO THE SCHEDULE OF FEDERAL AWARD EXPENDITURES
FOR THE YEAR ENDED DECEMBER 31, 2010**

NOTE A – SIGNIFICANT ACCOUNTING POLICIES

The accompanying Schedule of Federal Awards Expenditure (the Schedule) summarizes activity of the District's federal award programs. The schedule has been prepared on the cash basis of accounting.

NOTE B – MATCHING REQUIREMENTS

Certain Federal programs require that the District contribute non-Federal funds (matching funds) to support the Federally-funded programs. The District has complied with the matching requirements. The expenditure of non-Federal matching funds is not included on the Schedule.

INDEPENDENT ACCOUNTANTS' REPORT ON INTERNAL CONTROL OVER FINANCIAL
REPORTING AND ON COMPLIANCE AND OTHER MATTERS REQUIRED BY
GOVERNMENT AUDITING STANDARDS

Greene County Combined Health District
360 Wilson Drive
P.O. Box 250
Xenia, Ohio 45385

To the Board:

We have audited the financial statements of the governmental activities, each major fund and the aggregate remaining fund information of the Greene County Combined Health District (the District) as of and for the year ended December 31, 2010, and have issued our report thereon dated May 4, 2011, wherein we noted the District followed the cash basis of accounting, a comprehensive accounting basis other than accounting principles generally accepted in the United States of America. We conducted our audit in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States.

Internal Controls Over Financial Reporting

In planning and performing our audit, we considered the District's internal control over financial reporting as a basis for designing our auditing procedures for the purpose of expressing our opinions on the financial statements, but not for the purpose of opining on the effectiveness of the District's internal control over financial reporting. Accordingly, we have not opined on the effectiveness of the District's internal control over financial reporting.

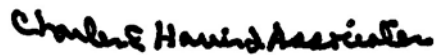
A *deficiency in internal control* exists when the design or operation of a control does not allow management or employees, when performing their assigned functions, to prevent, or detect and timely correct misstatements. A *material weakness* is a deficiency, or combination of internal control deficiencies resulting in more than a reasonable possibility that a material misstatement of the District's financial statements will not be prevented or detected and timely corrected.

Our consideration of internal control over financial reporting was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control over financial reporting that might be deficiencies, significant deficiencies or material weaknesses. We did not identify any deficiencies in internal control over financial reporting that we consider material weaknesses, as defined above.

Compliance and Other Matters

As part of reasonably assuring whether the District's financial statements are free of material misstatement, we tested its compliance with certain provisions of laws, regulations, contracts, and grants agreements, noncompliance with which could directly and materially affect the determination of financial statement amounts. However, providing an opinion on compliance with those provisions was not an objective of our audit and, accordingly, we do not express such an opinion. The results of our tests disclosed no instances of noncompliance or other matters we must report under *Government Auditing Standards*.

We intend this report solely for the information and use of management, members of the Board, federal awarding agencies and pass-through entities, and others within the District. We intend it for no one other than these specified parties.



Charles E. Harris & Associates, Inc.

May 4, 2011

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Charles E. Harris & Associates, Inc.
Certified Public Accountants

INDEPENDENT ACCOUNTANTS' REPORT ON COMPLIANCE WITH REQUIREMENTS
APPLICABLE TO EACH MAJOR PROGRAM AND INTERNAL CONTROL OVER COMPLIANCE
IN ACCORDANCE WITH OMB CIRCULAR A-133

Greene County Combined Health District
360 Wilson Drive
P.O. Box 250
Xenia, Ohio 45385

To the Board:

Compliance

We have audited the compliance of the Greene County Combined Health District (District), with the types of compliance requirements described in *U.S. Office of Management and Budget (OMB) Circular A-133 Compliance Supplement* that could directly and materially affect each of Greene County Combined Health District's major federal programs for the year ended December 31, 2010. The summary of auditor's results section of the accompanying schedule of findings identifies the District's major federal programs. The District's management is responsible for complying with the requirements of laws, regulations, contracts, and grants applicable to each major federal program. Our responsibility is to express an opinion on the District's compliance based on our audit.

We conducted our audit of compliance in accordance with auditing standards generally accepted in the United States of America; the standards applicable to financial audits included in the Comptroller General of the United States' *Government Auditing Standards*; and OMB Circular A-133, *Audits of States, Local Governments, and Non-Profit Organizations*. Those standards and OMB Circular A-133 require that we plan and perform the audit to obtain reasonable assurance whether noncompliance occurred with the compliance requirements referred to above that could directly and materially affect a major program. An audit includes examining, on a test basis, evidence about the District's compliance with those requirements and performing other procedures we considered necessary in the circumstances. We believe that our audit provides a reasonable basis for our opinion. Our audit does not provide a legal determination on the District's compliance with those requirements.

In our opinion, Greene County Combined Health District complied, in all material respects, with the requirements referred to above that could directly and materially affect each of its major federal programs for the year ended December 31, 2010.


Internal Control Over Compliance

The District's management is responsible for establishing and maintaining effective internal control over compliance with the requirements of laws, regulations, contracts and grants applicable to federal programs. In planning and performing our audit, we considered the District's internal control over compliance with requirements that could directly and materially affect a major federal program, to determine our auditing procedures for the purpose of opining on compliance and to test and report on internal control over compliance in accordance with OMB Circular A-133, but not for the purpose of opining on the effectiveness of internal control over compliance. Accordingly, we have not opined on the effectiveness of the District's internal control over compliance.

A deficiency in internal control over compliance exists when the design or operation of a control over compliance does not allow management or employees, when performing their assigned functions, to prevent, or to timely detect and correct, noncompliance with a federal program compliance requirement. *A material weakness in internal control over compliance* is a deficiency, or combination of deficiencies, in internal control over compliance, such that there is a reasonable possibility that material noncompliance with a federal program compliance requirement will not be prevented, or timely detected and corrected.

Our consideration of the internal control over compliance was for limited purpose described in the first paragraph of this section and would not necessarily identify all deficiencies in internal control that might be deficiencies, significant deficiencies or material weaknesses. We did not identify any deficiencies in internal control over compliance that we consider to be material weaknesses, as defined above.

We intend this report solely for the information and use of the finance committee, the District, management, federal awarding agencies and pass-through entities and other within the District. It is not intended for anyone other than these specified parties.



Charles E. Harris and Associates, Inc.

May 4, 2011

**SCHEDULE OF FINDINGS
OMB CIRCULAR A-133 SECTION .505**

**GREENE COUNTY COMBINED HEALTH DISTRICT
GREENE COUNTY
December 31, 2010**

1. SUMMARY OF AUDITOR'S RESULTS

(d)(1)(i)	<i>Type of Financial Statement Opinion</i>	Unqualified
(d)(1)(ii)	<i>Were there any material control weaknesses reported at the financial statement level (GAGAS)?</i>	No
(d)(1)(ii)	<i>Were there any significant deficiencies reported at the financial statement level (GAGAS)?</i>	No
(d)(1)(iii)	<i>Was there any reported material non-compliance at the financial statement level (GAGAS)?</i>	No
(d)(1)(iv)	<i>Were there any material internal control weaknesses reported for major federal programs?</i>	No
(d)(1)(iv)	<i>Were there any significant deficiencies reported for major federal programs?</i>	No
(d)(1)(v)	<i>Type of Major Programs' Compliance Opinion</i>	Unqualified
(d)(1)(vi)	<i>Are there any reportable findings under Section .510</i>	No
(d)(1)(vii)	<i>Major Programs:</i>	CFDA # 10.557 - Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) CFDA # 93.283 - Centers for Disease Control and Prevention - Investigation & Technical Assistance
(d)(1)(viii)	<i>Dollar Threshold: Type A/B Programs</i>	Type A: >\$300,000 Type B: All Others
(d)(1)(ix)	<i>Low Risk Auditee?</i>	Yes

SCHEDULE OF FINDINGS - (continued)
OMB CIRCULAR A-133 SECTION .505

GREENE COUNTY COMBINED HEALTH DISTRICT
GREENE COUNTY
December 31, 2010

**2. FINDINGS RELATED TO THE FINANCIAL STATEMENTS
REQUIRED TO BE REPORTED IN ACCORDANCE WITH GAGAS**

None

3. FINDINGS FOR FEDERAL AWARDS

None

STATUS OF PRIOR AUDIT'S CITATIONS AND RECOMMENDATIONS

The prior audit report, as of December 31, 2009, reported no material citations or recommendations.



Dave Yost • Auditor of State

GREENE COUNTY COMBINED HEALTH DISTRICT

GREENE COUNTY

CLERK'S CERTIFICATION

This is a true and correct copy of the report which is required to be filed in the Office of the Auditor of State pursuant to Section 117.26, Revised Code, and which is filed in Columbus, Ohio.

Susan Babbitt

CLERK OF THE BUREAU

**CERTIFIED
JUNE 28, 2011**