

GASTON COUNTY BUDGET CHANGE REQUEST (BCR)

TO: _____ Dr. Kim S. Eagle _____ COUNTY MANAGER

FROM: _____ 5810 _____ Hope United Survivor Network
Dept. Code Department Name

_____ Tara Joyner _____ 04/10/23
Department Director Date

REQUEST TYPE:

- ☐ Line-Item Transfer Within Department & Fund

☐ Project Transfer Within Department & Fund

☐ Line-Item Transfer Between Departments

☐ Line-Item Transfer Between Funds*

☒ Additional Appropriation of Funds*
- * Requires resolution by the Board of Commissioners

ACCOUNT DESCRIPTION As it appears in Munis Ex. Employee Training	ACCOUNT NUMBER										AMOUNT** Whole dollars only Ex. \$5,000 Ex. (\$5,000)
	4	3	3	5	6	7	4	2	6	5	
	Fund	Dept	Div	SubDiv	Prog	SubProg	Future	Func	Obj	Proj	
	XXXX	XXX	XXX	XXXXX	XXXXXX	XXXXXX	XXXX	XX	XXXXXX	XXXXX	
	Ex. 1000-BGT-000-00000-0000000-0000000-0000-01-520011-										
Donations & Gifts - Shelter	1000-CSS-291-29102-000000-0000000-0000-05-445004-										(649.40)
Donations: Shelter	1000-CSS-291-29102-000000-0000000-0000-05-520019-08162										649.40
Donations & Gifts - CAC	1000-CSS-291-29103-000000-0000000-0000-05-445004-										(1,735.72)
Donations: CAC	1000-CSS-291-29103-000000-0000000-0000-05-520019-16282										1,735.72
Donations & Gifts - HUSN	1000-CSS-291-00000-000000-0000000-0000-05-445004-										(6,095.88)
Donations: HUSN	1000-CSS-291-00000-000000-0000000-0000-05-520019-22218										6,095.88

JUSTIFICATION FOR REQUEST:

Appropriate donations funds from January 11, 2023 to March 30, 2023 for Hope United Survivor Network, The Cathy Mabry Cloninger Center, and The Lighthouse to expend as needed. All funds are unrestricted.

** Decreases in expenditures and increases in revenue accounts require brackets. Increases in expenditures and decreases in revenue do not require brackets. Please note that transfers between funds require inter-fund transfer accounts.