

## GASTON COUNTY BUDGET CHANGE REQUEST

TO: Dr. Kim S. Eagle COUNTY MANAGER

FROM: 5624 DHHS-Social Services

Dept. # Department Name

Angela Karchmer 8/10/2020

Department Director's Name Date

### TYPE OF REQUEST:

☐ Line Item Transfer Within Department & Fund

☐ Line Item Transfer Between Funds \*

☐ Project Transfer Within Department & Fund

☒ Additional Appropriation of Funds \*

☐ Line Item Transfer Between Departments\*

\* Requires resolution by the Board of Commissioners

ACCOUNT DESCRIPTION (As it appears in the budget)	ACCOUNT NUMBER	AMOUNT
	Fund - Function - Dept - Division - Object - Project	Whole Dollars Only
	xxx - xx - xxxx - xxxx - xxxxx - xxxxxx	(See Note Below)
CARES: Family Caregiver Support Progra	020-05-5624-0000-420000-21549	(\$20,881)
CARES: FCSP	020-05-5624-0000-560000-21549	\$20,881

### JUSTIFICATION FOR REQUEST:

Gaston County Adult and Aging Section has received Federal CARES funds to be used to provide services to family caregivers who have lost support or have been affected due to COVID 19.

Note: Decreases in expenditures & increases in revenue accounts require brackets. Increases in expenditures & decreases in revenue do not require brackets. Please note that transfers between funds require interfund transfer accounts.