

GASTON COUNTY BUDGET CHANGE REQUEST

TO: Earl Mathers COUNTY MANAGER

FROM: 5100 DHHS - Public Health
 Dept. # Department Name

 Department Director's Signature Date

TYPE OF REQUEST:

- | | |
|--|---|
| <input type="checkbox"/> Line Item Transfer Within Department & Fund | <input type="checkbox"/> Line Item Transfer Between Funds * |
| <input type="checkbox"/> Project Transfer Within Department & Fund | <input checked="" type="checkbox"/> Additional Appropriation of Funds * |
| <input type="checkbox"/> Line Item Transfer Between Departments* | <i>* Requires resolution by the Board of Commissioners</i> |

Resolution #	Date
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ACCOUNT DESCRIPTION <small>(As it appears in the budget)</small>	ACCOUNT NUMBER <small>Fund - Dept - Subdept - Div - Acct - Subacct xx - xxxx - xxxx - xxxx - xxx - xxx</small>	PROJECT SUBPROJECT <small>xxxxx - xxxx</small>	AMOUNT <small>Whole Dollars Only (See Note Below)</small>
Donations	11-5100-5112-5115-840-501		(\$175)
Special Programs	11-5100-5112-5115-298-000	17237-0001	\$175

JUSTIFICATION FOR REQUEST:

The Gaston County Department of Health and Human-Services – Public Health Division received a donation from Covenant Village for the Nurse Family Partnership (NFP) Program. These funds will be used to purchase diapers, wipes, formula, and other essential supplies for NFP clients during emergency situations. These are Non-County funds.

APPROVAL SIGNATURES:

 County Manager/Interim Assistant County Manager Date

 Financial Operations Manager/Asst. Financial Operations Mgr. Date

 Interim Budget Administrator Date

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.