GASTON COUNTY BUDGET CHANGE REQUEST				
TO:	Dr. Kim S. Eagle		NTY MANAGER	
FDOM		Elections		
FROM:		partment Name		
	Adam Ragan	8/13/20	120	
Department Director's Name Da				
TYPE OF REQUEST:				
Line Item	Transfer Within Department & Fur	Line Item Transfer Between Funds *		
Project Transfer Within Department & Fund X Additional Appropriation of Funds *				
Line Item Transfer Between Departments* <u>* Requires resolution by the Board of Commissioners</u>				
		ACCOL	NT NUMBER	AMOUNT
ACCOUNT DESCRIPTION		Fund - Function - Dept - Division - Object - Project		Whole Dollars Only
(As it appears in the budget)		xxx - xx - xxxx - xxxx - xxxxx - xxxxxx		(See Note Below)
2020 CARES Act Funds - BOE		010-01-4170-0000-420000-21536		(\$231,246)
Professional Services - CARES		010-01-4170-0000-530010-21536		\$30,000
Building Rental - CARES		010-01-4170-0000-530027-21536		\$40,000
Elections - CARES		010-01-4170-0000-530041-21536		\$161,246
JUSTIFICATION FOR REQUEST:				
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.				