	GA	STON CO	OUNTY BUDGET	CHANGE REQUEST	T
TO:	Dr. Kim S. Eagle		COUNTY MANAGER		
FROM:	5117	DHH	S - Public Health		
			partment Name		
Steve Eaton			4/27/	21	
	Department Director's Name		e Date		
TYPE OF REQUE	ST:				
Line Item Transfer Within Department & Fund				Line Item Transfer Bet	ween 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>					
			ACCO	UNT NUMBER	AMOUNT
ACCOUNT DESCRIPTION		1	Fund - Function - Dept - Division - Object - Project		Whole Dollars Only
(As it appears in the budget)		XXX - XX - XXXX - XXXX - XXXXX - XXXXXX		(See Note Below)	
Upstream FP Milestones			011-05-5117-0000-415000-21025		(\$14,000)
Upstream FP Milestones			011-05-5117-0000-560000-21025		\$14,000

JUSTIFICATION FOR REQUEST:

The Gaston County Department of Health and Human Services – Public Health Division received funds from Upstream. The Upstream organization provides evidence-based reproductive health training to engage health agencies in a contraceptive care quality improvement partnership. Upstream provided training to the Health Department Family Planning Program and the Health Department will receive funds for achieving the quality improvement milestones and processes. These funds will be used for employee development/training and educational/program supplies. These are non County funds.

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.