GASTON COUNTY BUDGET CHANGE REQUEST			
TO: Earl Mathers		COUNTY MANAGER	
EDOM			
FROM:		partment Name	
	TONYA FRYE	•	
	Department Director's Name	 e Date	
	•		
TYPE OF REQUEST:			
Line Item Transfer Within Department & Fund Line Item Transfer Between Funds *			Funds *
Project Transfer Within Department & Fund X Additional Appropriation of Funds *			
Line Item Transfer Between Departments* * Requires resolution by the Board of Commissioners			
	<u> </u>	ACCOUNT 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)
FUND BALANCE APPROPRIATED		010-99-9900-0000-490000	(2513)
JCPC ADMINISTRATION		010-05-5830-0000-560010-17172	13
PSYCHOLOGICAL TESTING		010-05-5830-0000-560010-17173	2500
JUSTIFICATION FOR REQUEST:			
To appropriate funds out of fund balance in order to refund the NC Department of Public Safety for FY2017 unspent Juvenile Justice and Delinquency Prevention grant funds.			
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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.			