

GASTON COUNTY BUDGET CHANGE REQUEST

TO: Dr. Kim S. Eagle COUNTY MANAGER

FROM: 4950 NC Cooperative Extension
Dept. # Department Name

David Fogarty 10/9/2019
Department Director's Name 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* | <u>* Requires resolution by the Board of Commissioners</u> |

ACCOUNT DESCRIPTION <small>(As it appears in the budget)</small>	ACCOUNT NUMBER <small>Fund - Function - Dept - Division - Object - Project xxx - xx - xxxx - xxxx - xxxxx - xxxxxx</small>	AMOUNT <small>Whole Dollars Only (See Note Below)</small>
Fee Based Prog:Food/Supplies	010-07-4950-4950-415013-15226	[542]
Fee Based Prog-Food/Supplies	010-07-4950-4950-560000-15226	542
Something Pumpkin	010-07-4950-4950-415013-17272	[950]
Something Pumkin	010-07-4950-4950-560000-17272	950

JUSTIFICATION FOR REQUEST:

This request is to accept and appropriate \$950 in donations to the Something Pumpkin event and \$542 in agriculture and nutrition workshop fees.

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.