

GASTON COUNTY BUDGET CHANGE REQUEST

TO: Dr. Kim S. Eagle COUNTY MANAGER

FROM: 4315 SHERIFF'S OFFICE
Dept. # Department Name

ALAN CLONINGER 8/6/2021
Department Director's Name Date

TYPE OF REQUEST:

☐ Line Item Transfer Within Department & Fund

☐ Line Item Transfer Between Funds *

☐ Project Transfer Within Department & Fund

☒ Additional Appropriation of Funds *

☐ Line Item Transfer Between Departments*

* Requires resolution by the Board of Commissioners

ACCOUNT DESCRIPTION (As it appears in the budget)	ACCOUNT NUMBER	AMOUNT
	Fund - Function - Dept - Division - Object - Project	Whole Dollars Only
	xxx - xx - xxxx - xxxx - xxxxx - xxxxxx	(See Note Below)
DONATION: CAROMONT HEALTH CAROMONT DEFIBRILLATORS	010-02-4315-4315-415001-22021	{83,000}
	010-02-4315-4315-560000-22021	83,000

JUSTIFICATION FOR REQUEST:

The Sheriff's Office has received a donation of \$83,000 from the CaroMont Health Foundation for the replacement of AED devices in patrol vehicles. The current G3 AED model is nearing its shelf life and has been replaced with the upgraded G5 model. This Board Action will accept as revenue \$83,000 and appropriate as expenditure into the CaroMont Defibrillator account as requested.

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.