GASTON COUNTY BUDGET CHANGE REQUEST (BCR)

TO: Matt	thew Rhoten, Co	ounty Manager		
FROM:	HLT	DHHS - Public He	alth	
	pt. Code	Department Na	me	
	Brittain Kenney		9/23/2025	
_	Departme	ent Director	Date	
REQUEST TYPE:				
Line-Item Transfer W	/ithin Departmeı	nt & Fund	Line-Item Transfer Bet	ween Funds*
Project Transfer With	Additional Appropriation	on of Funds*		
Line-Item Transfer B	etween Departn	nents	* Requires resolution by the	Board of Commissioners
ACCOUNT DESCRIPTION		ACCOUNT NU	JMBER	AMOUNT**
As it appears in Munis Ex. Employee Training	4 3 Fund Dept XXXX XXX Ex. 1000-1	xxx xxxxx xxxxx xx	7 4 2 6 5 bProg Future Func Obj Proj 0000XX XXXX XX XXXXXXXXXXXXXXXXXXXXXXX	Ex. \$5,000.00 Ex. (\$5,000.00)
Retirement:Gaston HIV Outreach	1000-HLT-253-00000-ComDis-GHOP000-0000-05-510101-GGF			\$12,500
StGrtRev: Gaston HIV Outreach	1000-HLT-253-0	0000-ComDis-GHOP00	0-0000-05-410001-GGHOP	(\$12,500)

JUSTIFICATION FOR REQUEST:

The Gaston County Department of Health and Human Services – Public Health Division receives State Grant funds from the NC Department of Health and Human Services Epidemiology Section/Communicable Disease Branch to provide Integrated Targeting Testing Services (ITTS) which includes HIV and STD counseling, testing, and referral to high-risk, hard to reach, key priority groups. The funds will be used for personnel costs of staff implementing the Gaston County Public Health HIV Outreach Program (GHOP). 534 Integrated Targeting Testing Services (ITTS) Agreement Addendum. Service period of award: 6/1/2025 – 5/31/2026. These are non-County funds.

^{**} Decreases in expenditures and increases in revenue accounts require brackets. Increases in expenditures and decreases in revenue do not require brackets. Please note that transfers between funds require inter-fund transfer accounts.