



Gaston County

Gaston County
Board of Commissioners
www.gastongov.com

Animal Care and Enforcement Board Action

File #: 20-187

Commissioner Hovis - Animal Care and Enforcement - To Accept and Appropriate Donation Funds to Assist in the Medical Care of Shelter Pets (\$5,670)

STAFF CONTACT

Kristine Blankenship, DVM - Animal Care Administrator

BUDGET IMPACT

Appropriate \$5,670 in donations for Medical Care of Shelter Pets.

BUDGET ORDINANCE IMPACT

N/A

BACKGROUND

Money received in donations earmarked by donor for the medical care of shelter animals are required to be accepted and transferred from the revenue fund to the expenditure fund. GCACE would like the donations, a total of \$5,670 (100%) in the Donations-Medical Care expenditure account, to be appropriated to the current fiscal year 19-20 into the expenditure Medical Care account to provide medical care for the animals in the care of Gaston County Animal Care and Enforcement - Animal Shelter.

POLICY IMPACT

N/A

ATTACHMENTS

Budget Change Request (BCR)

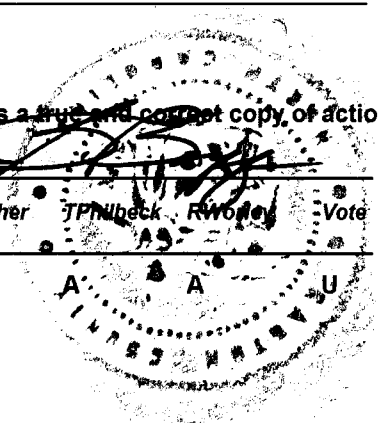
DO NOT TYPE BELOW THIS LINE

I, Donna S. Buff, Clerk to the County Commission, do hereby certify that the above is a true and correct copy of action taken by the Board of Commissioners as follows:

NO.	DATE	M1	M2	CBrown	JBrown	AFrley	BHovis	Keigher	JPhibeck	RWolfe	Vote
2020-093	04/28/2020	RW	BH	A	A	A	A	A	A	A	U

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A=AYE, N=NAY, AB=ABSENT, ABS=ABSTAIN, U=UNANIMOUS

GASTON COUNTY BUDGET CHANGE REQUEST

TO: Dr. Kim S. Eagle COUNTY MANAGER

FROM: 4380 GCPD-ACE
 Dept. # Department Name

Joseph Ramey 4/6/20
 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*	<small>* Requires resolution by the Board of Commissioners</small>

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>
Donations-Medical Care	010-02-4380-0000-415001-Medcl	[5,670.00]
Medical Care-	010-02-4380-0000-530015-Medcl	5,670.00

JUSTIFICATION FOR REQUEST:

Money received in donations earmarked by donor for the medical care of shelter animals are required to be transferred from the revenue fund to the expenditure fund. GCACE would like the donations a total of \$5,670.00 (100%) to be appropriated to the current fiscal year 19-20 into the Medical Care account (010-02-4380-0000-520004-Medcl) to provide medical care for the animals in the care of Gaston County Animal Care and Enforcement-Animal shelter.

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.