

GASTON COUNTY BUDGET CHANGE REQUEST (BCR)

TO: _____ Dr. Kim S. Eagle _____ COUNTY MANAGER

FROM: _____ CSS _____ DHHS-Social Services _____
Dept. Code Department Name

_____ Angela Karchmer _____ 5/24/2022
Department Director Date

REQUEST TYPE:

- ☐ 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 Munis	ACCOUNT NUMBER										AMOUNT** Whole dollars only
	4	3	3	5	6	7	4	2	6	5	
	Fund	Dept	Div	SubDiv	Prog	SubProg	Future	Func	Obj	Proj	
	XXXX	XXX	XXX	XXXXX	XXXXXX	XXXXXX	XXXX	XX	XXXXXX	XXXXX	
Ex. Employee Training	Ex. 1000-BGT-000-00000-000000-000000-0000-01-520011-										Ex. \$5,000 Ex. (\$5,000)
SC Johnson Donation/MOW	1000-CSS-272- 00000-AdtNut-MealsWh-0000-05-445006-L0002										(\$15,000)
SCJohnson Prog Supplies: Mobile Food Pantry	1000-CSS-272-00000-AdtNut-MealsWh-0000-05-520002-L0002										\$4,000
SCJohnson Food & Provisions: Mobile Food Pantry	1000-CSS-272-00000-AdtNut-MealsWh-0000-05-520005-L0002										\$10,000
SCJohnson Advertising: Mobile Food Pantry	1000-CSS-272-00000-AdtNut-MealsWh-0000-05-520015-L0002										\$1,000

JUSTIFICATION FOR REQUEST:

The SC Johnson grant was awarded for a senior mobile food pantry to purchase food items, promotional advertisement, food bags, and educational materials to promote the health & wellbeing of our aging population.

** 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.