	GASI	ON COUNTY BUDG	SET CHAN	GE REQUEST		
TO: _	TO: Earl Mathers		_COUNTY M			
FROM: _	5100 Dept. #	DHHS - Public Health Department Name				
Ē	epartment Director	r's Signature D	ate			
TYPE OF REQUES	iT:					
Line Item T	ransfer Within Departme	ent & Fund		ine Item Transfer Between	Funds *	
Project Transfer Within Department & Fund			X	X Additional Appropriation of Funds *		
Line Item Tr	ransfer Between Depart	ments*	<u>* F</u>	Requires resolution by the E	Board of Commissioners	
			Resolutio	on #	Date	
		ACCOUNT NUM	BER	PROJECT	AMOUNT	
ACCOUNT DESCRIPTION		Fund - Dept - Subdept - Div - Acct - Subacct		SUBPROJECT	Whole Dollars Only	
(As it appears in the budget)		xx - xxxx - xxxx - xxxx - xxx		xxxxx - xxxx	(See Note Below)	
ther Grants		11-5100-5112-5119-890-512			(\$500)	
Special Programs		11-5100-5112-5119-298	3-000	16253-0001	\$500	
UNC-Chapel Hill with corner stores purchase supplies	nty Department of I for the Healthy Co s so that the stores s for the corner sto	orner Store Initiative. The can offer more healthy for	e Healthy Co ood options f	orner Store Initiative i or the community. The	awarded grant funds from s a project to collaborate nese funds will be used to options and to purchase	
APPROVAL SIGN	NATURES:					
County Manager/Assistant County Manager Date			Interim Fin	ancial Services Director	Date	
			Assistant F	Finance Director	 Date	