GASTON COUNTY						
	<b>BUDGET CHANG</b>	E REQUEST (BCR)				
TO:	Dr. Kim S. Eagle, County Manag	er				
		-				
FROM:	CSS Survivor Services Dept. Code Department Name				]	
	Gregory Gr			7/5/2024	]	
	Department D	irector		Date		
REQUEST TYPE:	Line-Item Transfer Within Department & Fund  Project Transfer Within Department & Fund  Line-Item Transfer Between Funds*  ✓ Additional Appropriation of Funds*  *Requires resolution by the Board of Commissioners					Funds*
ACCOUNT DESCRIPTION	Δ.	COLINIT NUIMABED			A N.	10UNT**
ACCOUNT DESCRIPTION	ACCOUNT NUMBER					
As it appears in Munis	Fund-Dept-Div-SubDiv-Prog-SubProg-Future-Obj-Proj XXXX-XXX-XXX-XXXXX-XXXXXX-XXXXXX-XXXXXX					dollars only
Ex. Employee Training	Ex. 1000-BGT-000-00000-000000-000000-01-520011-					(\$5,000) :. \$5,000
	EX. 1000 BG1 000 0000		000 01 3	,20011		. 43,000
Fund Balance Appropriated	1000-NDP-000-00000-FBApro-0	0000000-0000-99-4900	000-		\$	(32,469.56)
Donations: HUSN	1000-CSS-291-00000-Donatn-0				\$	1,067.00
Donations: Shelter	1000-CSS-291-29102-Donatn-0				\$	5,544.72
Donations: Shelter Repairs & Maint	1000-CSS-291-29102-Donatn-0				\$	15,010.00
Donations: CAC	1000-CSS-291-29103-Donatn-0				\$	2,915.84
Donations: Threads of Hope	1000-CSS-291-00000-ThrdHp-0				\$	6,150.00
Donations: Hope for Holidays	1000-CSS-291-00000-Hope4H-0	0000000-0000-05-5200	007-		\$	1,782.00
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		Chec	ck cell- Amo	ounts must sum to \$0	\$	-
** Decreases in expenditures and increases in reven unds require inter-fund transfer accounts.	ue accounts require brackets. Increases in ex	penditures and decreases in re-	evenue do n	ot require brackets. Pl	ease note tha	nt transfers between
IUSTIFICATION FOR REQUEST:						
Appropriate donations funds from Ap The Lighthouse to expend as needed. balance, carried forward and appropr All funds are unrestricted.	The donations rolled into fund b	palance at June 30, 202	24 and ne	eed to be appro	priated ou	ut of fund